



LEAVE FORM STUDENTS

Name student:.....

Group:.....

Name parent:.....

Emailaddress parent:.....

Phone Number parent:.....

asks leave for period:

Start date:.....(day)(month)(year)

End date:.....(day)(month)(year)

total days:.....

Reason for the leave:

.....
.....

Signature parent/caretaker

.....

Approval Principal: YES / NO

L.J. Veldhuyzen

Explanation in case of non approval: