



67A – TEACHING ASSISTANT LEAVE OF ABSENCE FORM

STUDENT INFORMATION

ID No : Full Name :
Phone : E-mail :
Address :

Start of Leave Date : *End of Leave Date:*
Return to Work Date :

TYPE OF LEAVE

1. Annual Vacation 2. Scientific Meeting

If (2) is chosen, you have to attach F-03 form.

If your remaining leave balance is below from your requested time, the relevant leave will be deemed unpaid leave.

MAKE UP ARRANGEMENTS FOR DUTIES

Give details for duties and makeup arrangements during your leave:

Date:

TA Signature:

To be filled in by the PROGRAM COORDINATOR

Comments

Date:

Signature:

To be filled in by the ADVISOR

Comments

Date:

Signature:

To be filled in by the GRADUATE PROGRAM COORDINATOR

Comments

Date:

Signature: