University of Pretoria Application for Period of Leave of Absence

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| --- | --- |
| **Student number** |  |
| **Study programme** |  |
| **Title** |  |
| **Initials** |  |
| **Surname** |  |
| **Postal address** |  |
| **Mobile phone no.** |  |
| **Email** |  |
| **Period of absence** | Months |  | Years |  |
| **Date of return** |  |
| **Student motivation** (Reasons for absence and intentions when studies resume) |
|  |
| **Signature** |  | **Date** |  |
| **Supervisor** |  |
| **Comments/ Recommendations:** |
|  |
| **Signature** |  | **Date** |  |
| **Head of Department** |  |
| **Comments/Recommendations:** |
|  |
| **Signature** |  | **Date** |  |
| **Dean** |  |
| **Decision** |  |
| **Signature** |  | **Date** |  |
|  |
| **In system** |  |  |  |