

COMSATS University Islamabad

Application for Leave of Absence MS \square Ph.D. \square

Student's Name:	Registration #	
Program:	Department:	
Campus:	Date of application:	
Leave requested for semester*:	Leave availed before? (Yes/No):	
Documents Required:		
(a) Fee payment receipt attached? (Yes/No):	(b) Copy of Transcript Attached (Yes/No):	
Reason for leave of absence:		
I hereby request for leave of absence for consideration under CUI rules.		

Note: Please specify the semester for which leave is requested (e.g. SP24, FA24 etc.) A leave of absence in the 1st semester or two consecutive semesters is not allowed.

Applicant's Signature

	Recommendations	Name & Signature
Supervisor	Recommended	Name:
	Not Recommended	Signature:
Head of the Department	Recommended	Name:
	Not Recommended	Signature:
Chairperson of the Department	Recommended	Name:
	Not Recommended	Signature:
Dean of the Faculty	Approved	Name:
	Not Approved	Signature:
Registrar CUI	Approved	Name:
	Not Approved	Signature:
Notified vide Nof Registrar.	Notification No.	by Office