

佛教葉紀南紀念中學

學生請假信

敬啟者：

敝子弟_____ (班別：_____ 班號：_____)，現向校方申請

*病假，原因為：_____

*事假，原因為：_____

請假日期： 由 _____ 年 _____ 月 _____ 日 (第 _____ 節) 至
_____ 年 _____ 月 _____ 日 (第 _____ 節) 止。

共請假 _____ 天 _____ 節。

*隨函附上：

醫生病假證明書 (兩天或以上病假，必須附呈註冊醫生病假證明書)

公開考試或比賽證明書 _____

沒有證明書

其他證明文件：_____

此致

佛教葉紀南紀念中學

家長/監護人簽署：_____

家長/監護人姓名：_____

_____ 年 _____ 月 _____ 日

備註：

1. 學生應在復課當天把請假信交給班主任
2. * 請在合適方格內打上☑
3. 事假申請須於最少兩個工作天前呈交給班主任

此欄由校方填寫	
家長申請病假	家長申請事假
班主任姓名：_____	<input type="checkbox"/> 批准 <input type="checkbox"/> 不批准
班主任簽署：_____	訓育主任簽署：_____
日 期：_____	日 期：_____

Buddhist Yip Kei Nam Memorial College

Student Application of Leave of Absence

To whom it may concern,

My child _____ (Class : _____ Class no. : _____), would like to apply:

*Sick Leave due to _____

*Casual Leave due to _____

Date of absence : from _____ / _____ / _____ (_____) to

Date Month Year Period

_____ / _____ / _____ (_____)

Date Month Year Period

Total no. : _____ day(s) _____ period(s)

*Supportive document in enclosed

Medical certificate (must be submitted for sick leave more than one day)

Public Examination or Competition certificate _____

No document

Other document : _____

Parent/Guardian's Signature: _____

Parent/Guardian's Name: _____

Date: _____

Remarks:

1. Please submit the application letter to Class Teacher on the first day when the student returns to school
2. * Please tick the appropriate box
3. Parents applying for casual leave to submit the application to school two days in advance.

For Official Use Only

Parents' application for sick leave

Name of Class Teacher : _____

Class Teacher's Signature : _____

Date : _____

Parents' application for casual leave

Approve Not Approve

Discipline Master's Signature : _____

Date : _____