

Appendix 1 – Application for Leave of Absence and Academic Approval Form



Part 1: Application for Leave of Absence (Student to complete)

Student Name:	Click or tap here to enter text.		
Student ID Number:	Click or tap here to enter text.	Personal Tutor:	Click or tap here to enter text.
Programme of Study:	Click or tap here to enter text.		

Leave of Absence details

Has a previous Leave of Absence been granted? Yes* No

*If yes, please give dates and reasons: Click or tap here to enter text.

Are you applying to extend an existing Leave of Absence? Yes* No

*If yes, please give new dates and reasons: Click or tap here to enter text.

Dates of the Leave of Absence being requested:

From: Click or tap to enter a date. To: Click or tap to enter a date.

You must apply for a Leave of Absence at the time the situation arises that adversely impacts on your ability to study.

Please indicate reason(s) for requesting a Leave of Absence (tick all that apply):

Medical	<input type="checkbox"/>
Personal / Family	<input type="checkbox"/>
Maternity / Paternity	<input type="checkbox"/>
Other please specify below	<input type="checkbox"/>
Click or tap here to enter text.	

Please provide a brief statement to support your request.

Click or tap here to enter text.

Funding Details

Do you receive a (please tick as appropriate):

Student Finance Tuition Fee Loan	<input type="checkbox"/>
Student Finance Maintenance Loan	<input type="checkbox"/>

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NMITE Bursary / Scholarship please specify below	<input type="checkbox"/>
Click or tap here to enter text.	

Taking Leave of Absence may affect your tuition fee liability. If you would like information regarding the financial implications for your Leave of Absence, please contact the Student Support Team.

Accommodation Details	
Are you currently living in NMITE managed accommodation?	
Yes <input type="checkbox"/>	No <input type="checkbox"/>

Third Party Sponsorship Details	
Do you have a sponsor?	
Yes <input type="checkbox"/>	No <input type="checkbox"/>

Student Declaration:

I understand the implications of taking the Leave of Absence and that it is my responsibility to notify NMITE of my wish to return prior to the proposed date of return quoted on this form.

Signature: Click or tap here to enter text.

Date: Click or tap to enter a date.

Part 2: Academic Approval (OFFICE USE ONLY)

Leave of Absence request details

If the request is retrospective, please comment on the reasons for the late submission.

Click or tap here to enter text.

Please specify any conditions (non-medical) for the student's return:

Click or tap here to enter text.

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Full Name	Click or tap here to enter text.
Job Title:	Click or tap here to enter text.

Signature: Click or tap here to enter text.

Date: Click or tap to enter a date.

*Please forward this form to registrar@nmite.ac.uk within 5 working days of submission.