



APPLICATION FOR LEAVE OF ABSENCE

Student No.	Last Name	First Name	Middle Name	Course & Year
21-1-01435	MENDIOLA	JAYRA		BS CHEMISTRY 1

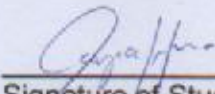
09-19-22

Date

Department of DoPAC
Dean, College of Arts and Sciences
Visayas State University
Visca, Baybay City, Leyte

Sir / Madam:

I would like to apply for leave of absence effective 1st sem until the end of 2nd sem for the following reason(s) my first choice was nursing then the department of nursing said that due to lack of availability of slot at the time when I decided to shift, they advised me to go back next year.


Signature of Student

For currently enrolled students only:

For a leave of absence to be availed of during the 2nd half of the semester, professors concerned are required to indicate the class standing of the student whether "Passing" or "Failing" at the time of application for leave.

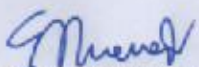
Subject	Class Standing	Inst./Prof. Signature

Subject	Class Standing	Inst./Prof. Signature

Recommending Approval:

Approved:

Noted:


ELIZABETH S. QUEVEDO
Department Head
Date: 09/20/2022

MA. THERESA P. LORETO
College Dean
Date: _____

MANOLO B. LORETO, JR.
Dean of Students
Date: _____

Distribution: 1 Registrar, 1 Dean of Students, 1 College Dean, 1 Parents/Guardian, 1 Student

Vision: A globally competitive university for science, technology, and environmental conservation.
Mission: Development of a highly competitive human resource, cutting-edge scientific knowledge and innovative technologies for sustainable communities and environment.