Application for Compassionate Leave for Examination

1. In the event of death in student’s immediate family (defined to include parents, siblings and grandparents), student may:
   i.) Proceed with his/her scheduled examination(s); or
   ii.) Decide not to take the examination(s).

2. If the student decides not to sit for the examination, he/she must submit a copy of the death certificate with this form to Examination Board, latest by the 2nd working day after the examination period.

3. Leave of Absence on compassionate reasons will be granted for absence from any examinations within 7 days of the death (starting from the day of the death, inclusive of Saturdays, Sundays and Public Holidays).

To be completed by student:

Name: ______________________________________________

Student ID: __________________________________________

Course / Intake: _______________________________________

Contact No.: _________________________________________

Relationship to Deceased: ________________________________

Date of Death: _________________________________________

Exams Missed: _________________________________________
(Please indicate only courses which you were absent for)

Remarks (if any):
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

Signature: ___________________________ Date: ________________