



Faculty of Nursing, Thammasat University
Request Form for Business Leave

Written at.....

Date:.....

Re: Application for leave

for.....

Dear.....,

I,....., in the..... year of
the..... curriculum would like to request
permission from..... for leave of absence from the
subject of.....
during the dates from.....
to..... from..... hrs. to..... hrs.,
totalling..... days. Reason for the leave:

.....
.....
.....
.....

During the leave, I may be reached at

.....
.....
.....
.....

Yours faithfully,

(Signed).....

.....

(.....)

Advisor's Comments

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.....
.....

(Signed).....

.....

(.....)

Date:.....

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Consideration of Teaching/Orientating Instructor

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.....
.....

(Signed).....

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(.....)

Date:.....

Subject Coordinator's Comments

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(Signed).....

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(.....)

Date:.....

Student's Acknowledgment

I,.....
....., acknowledge the above and am willing to comply
by.....

In the event that the student is required to make up for the lost
practice, please see the orientating instructor for the timetable to make
up for the lost practice following the signing to acknowledge the
consideration results.

(Signed).....

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(.....)

Date:.....