



**THE NEW INDIAN SCHOOL W.L.L
KINGDOM OF BAHRAIN**

STUDENT LEAVE APPLICATION FORM

Name of the Student:
(as per Passport and C.P.R)

Grade:Div.: Admission No.: C.P. R No:

Leave applied under the category:

- Sick Leave (2 to 3 days) Extended Sick Leave * (More than 10 days)
 Emergency Leave * Long Leave *

*** Requires administrative approval**

Period of Leave: From To

No. of Days :

Reason for Leave:

- Is the leave request capable of proof? Yes, Proof enclosed No
Is a detailed letter enclosed? Yes No

Name of the Parent:
(as per Passport and C.P.R)

Telephone Number: Mob Res..... C.P.R No.....

Contact No. (If Travelling outside Bahrain):

Signature of the Parent – with date:

Note to Parents:

If holidays occur within the leave period, these shall also be included in the number of leave days taken.

For Office Use Only

Leave Application Received by	Signature / Date	Remarks
Principal / Vice Principal (If leave exceeds 10 days)		
Class Teacher		