

Leave Form

Thepsatri Rajabhat University

Date.....

Subject ; Request for Leave

To : President of Thepsatri Rajabhat University

I,....., would like to request for sick leave personal leave from.....to.....for the total of.....work days.

I have last taken sick leave personal leave from.....to.....for the total ofwork days.

During the leave period, you can contact me at.....

(signature).....

(.....)

Program chair's opinion

.....
.....

Signature.....

Date...../...../.....

Action on request

Approved

Disapproved

Signature.....

Dean

Date...../...../.....

Type of leave	Previous leave	Present leave	Total
Sick leave			
Personal leave			

Signature.....

Date...../...../.....