



# National College of Arts

A Federal Chartered Institute

Government of Pakistan

4, Shahrah-e-Quaid-e-Azam, Lahore-54000, Pakistan

Ph: (042) 99211622 - 99210599, Fax: (042) 99210500

Email: vc@[nca.edu.pk](mailto:vc@nca.edu.pk)

No: NCA/ \_\_\_\_\_

Date: \_\_\_\_\_

## **STUDENT LEAVE APPLICATION FORM**

This form is to be used by the students for all leave applications including medical leave. All medical leave applications must be supported by a valid medical certificate and submitted at College Reception prior to the leave or not later than three days after expiry of the leave.

**Name of the student:** \_\_\_\_\_

**Department /Class:** \_\_\_\_\_ **Roll No.** \_\_\_\_\_

**College Email ID:** \_\_\_\_\_

**Duration of Leave:** From \_\_\_\_\_ To \_\_\_\_\_ **No. of Days** \_\_\_\_\_

**Nature of Leave:** **Medical**  **Other**

**Reason for Leave:**

\_\_\_\_\_  
**Signature of Student**

\_\_\_\_\_  
**Signature of Parent/Guardian**

\_\_\_\_\_  
Verified by:  
(Class Teachers)

Recommended  Not Recommended

\_\_\_\_\_  
(Head of Department)

**Comments by HOD in case of not recommended:**

### **Note:**

- Duly filled and signed Leave Application Form to be submitted at College Reception
- Student is responsible to cover for the missed courses work / assignment.
- Attach duly signed medical certificate/reports by Medical Officer-NCA in case of medical leave

### **For Office use only:**

**Additional Registrar Comments:**