

TIGP-SCST Student Leave of Absence Form

Student Name		Student ID No.		Lab Location	
Reason for taking a leave:					
Do you plan to go out of Taiwan? (For private trip only)	<input type="checkbox"/> No <input type="checkbox"/> Yes Destination: _____	Contact Information	E-mail _____	Phone No. _____	
			Mailing Address _____		
Duration	From: _____ (MM/DD/YY) To: _____ (MM/DD/YY)			Total _____ days	
Class Missed	<u>Course Code</u>	<u>Course Title</u>	<u>Lecturer's Signature</u>		
	1. _____	_____	_____		
	2. _____	_____	_____		
	3. _____	_____	_____		
	4. _____	_____	_____		
	5. _____	_____	_____		
6. _____	_____	_____			
Student's Signature	Date: _____ (MM/DD/YY)			ARC Expiration Date: _____ (MM/DD/YY)	
To be completed by Thesis Advisor:					
Signature from Advisor: _____		Recommendation: ____Approve ____Disapprove		Date: _____ (MM/DD/YY)	
Signature from Academic & Student Affairs Committee Chair or Vice-Chair			SCST Office Recording		
(Leaving more than 7 days) SCST Coordinator's Signature					

Remarks:

1. Please return the completed form to the SCST secretary after you have obtained all necessary signatures. Failure to comply with the regulation may result in termination of your fellowship.
2. If you leave more than 14 days, the fellowship will be temporarily suspended until you return.
If you leave more than 30 days (including holidays), you should provide a statement which includes both advisor's and your signatures.
3. Please note that the regulation for leave of absence is applicable to all working days (including school winter and summer breaks) announced by the government.