

CENTRE FOR POSTGRADUATE STUDIES

APPLICATION FOR LEAVE OF ABSENCE

Semester , Session /

Reinstatement of studies : ☐ First- RM 300 ☐ Second - RM 500 ☐ Third & onwards RM 1000

INSTRUCTIONS:

To Candidate

- Please complete Section A. You are required to submit this form to the Deputy Dean (Postgraduate) of your Kulliyah/Institute
- Sponsored students who would like to apply for a leave of absence for any reason, must enclose a consent/approval letter for the leave of absence from their sponsor(s).
- A student will not be granted a leave of absence unless the following conditions are fulfilled:
 - To attend class as usual and sit for any mid-term/final examinations
 - Students must submit the application form along with a valid air ticket or other relevant travel documents to the Kulliyah/Institute before leaving the country. The table below outlines common reasons and the corresponding required documents.

Reasons		Supporting Documents
1.	Medical problem e.g.: accidents, and any other serious health problem	Medical report certified by the IIUM Helath Centre and, air ticket for International Students
2.	Personal problems e.g.: family problems, marriage problems, stress	Counsellor report certified by the IIUM Counselling & Career Guidance Department or IIUM Health Centre and, air ticket for International Students
3.	Work constraints	Recommendation letter from employer, air ticket and work permit for International Students

A fee of RM50.00 will be charged as an administrative fee. Please pay to Bank Muamalat (M) Berhad – IIUM Operating Account (**1407-000000-4716**) and attach copy of payment slip to this form for submission to Postgraduate Office, Kulliyah.

Section A: Student's Information (to be filled by the student)

Name:		Matric No
Tel no & email:		
Programme: <input type="checkbox"/> PhD <input type="checkbox"/> MASTER		
Department & Kuliyyah		
Sponsor:		
Reason:		

FOR STUDENT ON IIUM FINANCIAL LOAN	
I understand that if my application is successful, my financial loan will be suspended during the approved leave of absence period.	
Date: _____	Student's Signature: _____
Section B: HEAD OF DEPARTMENT / PG COORDINATOR (if relevant) Recommendation	
<input type="checkbox"/> RECOMMEND	<input type="checkbox"/> NOT RECOMMEND
Remarks: _____	
Date: _____	Signature & Official Stamp: _____
Section C: DEPUTY DEAN (POSTGRADUATE AND RESEARCH) Approval	
<input type="checkbox"/> APPROVED	<input type="checkbox"/> NOT APPROVED
Remarks: _____	
Date: _____	Signature & Official Stamp: _____

Important Notes:

Semester fees chargeable for leave of absence

- i- Application before semester begin – Nil
- ii- Application in the first month – 10%
- iii- Application in the second months – 40%
- iv- Application in the third months – 100%