

Faculty of Engineering & Physical Sciences

NOTIFICATION OF INTENTION TO TAKE LEAVE OF ABSENCE

Postgraduate Research Degrees

Purpose of this form	To notify the school of the intention to take holiday or leave of absence (conference attendance does not require this form)
Who completes the form?	The student should complete sections 1 and 2. The main supervisor should complete section 3.
Where is it sent?	Completed request forms should be submitted to the school PG administrator

Part 1: Student details

Student ID number _____

Surname/Family name _____ Forename(s) _____

School : Mathematics _____ Subject _____

Current Degree Registration: PhD/EngD/EntD/MPhil/MSc by Research/MEnt
Part-time/Full-time

Main supervisor _____ Advisor _____

Address & e-mail address to send correspondence to:

Part 2: Leave of Absence details

We request annual leave from DD/MM/YYYY to DD/MM/YYYY

Total no of days requested:

NB Total Leave must not exceed 8 weeks in total per academic year

Signed Student _____ DD/MM/YYYY

Part 3: Recommendation of the supervisor

I confirm that I agree to the requested holiday period and that this does not exceed the School allowance of 8 weeks total leave (inclusive of University closure days and bank holidays) for full time students

Signed Supervisor _____ DD/MM/YYYY

Where more than 8 weeks total leave is requested in a 12 month period or more than 4 consecutive weeks are required then permission is required from the Postgraduate Director

Signed Head of School
or Nominated Representative _____ DD/MM/YYYY