聖若瑟英文中學 請假申請

敬啟者:		マナムギケ		
小兒因 病/ 事*,需[學生姓名:			選歩・	
請假日期:由年	月日 至	年	月日	
共請天	E (上午 / 下午	/ 全日)*。		
請假原因:(必須詳列原因	,「家有要事」或	「身體不適」不	下可作為請假的理由)	
醫生病假證明: □ 有,隨	通 函附上。(平日上	課天超過一天之	Z病假,以及任何考》	 則期間之
_	病假缺	·席,均必須呈3	交醫生證明。)	
無。				
此致 聖若瑟英文中學				
主 石必入入 中		家長	簽署:	
		日	期:	
*請刪去不適用者。				
 聖若瑟英文中學				 請假申請
下列部份由校方填寫:				明以宁明
學生姓名:	斑別:	學號:	校長簽署:	
之申請 □獲批准	生素性大型生素儿		☐ U □ ·	
□ 个 便 加 准 , 学 2	生需提交報告交付	\胡似凶出。	日 期:	
學生呈交請假信(及醫生證			<u> </u>	
(病假需於復課後三個上課	大主父,事假須加		问仪 力申請)	
	學生收	[條		
聖若瑟英文中學				請假申請
下列部份由校方填寫:			ı	
超	### ### #############################	超些.	松巨炫型:	
學生姓名:	班別:	學號:	校長簽署:	
—	生需提交報告交付	:請假因由。	日 期:	

St. Joseph's Anglo-Chinese School Application of Leave of Absence

To whom it may co	,			
My son 🔲 t	took leave of absence due to s	sickness.		
	would like to apply for leave o	f absence due to p	ersonal reaso	ns.
_		·		0.:
Date of absence:	from / / year	to/	/ year	
Total no. of day(s)	(a.m. / p.m. / wh	ole day) *.		
	e: (Detailed explanation must is not a sufficient reason)		rely 'family ma	atters' or 'sickness'
Medical documen		nitted for sick leave m d for any sick leave d		
		Parent signatu	re ·	
		Date		
* Please delete as	appropriate.	- 415	•	······································
* Please delete as				_
St. Joseph's Anglo-	-Chinese School		·	Leave Application
St. Joseph's Anglo- To be filled in by the	-Chinese School			_
St. Joseph's Anglo-	-Chinese School	No.:	Principal	_
St. Joseph's Anglo- To be filled in by the Student	-Chinese School he school: Class:		Principal	Leave Application
St. Joseph's Anglo- To be filled in by the Student Name:	-Chinese School he school: Class:	No.:	Principal	Leave Application
St. Joseph's Anglo- To be filled in by the Student Name:	-Chinese School he school: Class:	No.:	Principal	Leave Application
St. Joseph's Anglo- To be filled in by the Student Name: The application is	-Chinese School he school: Class: approved. not approved. Student report of explanation.	No.:	Principal Signature: Date:	Leave Application
St. Joseph's Anglo- To be filled in by the Student Name: The application is	Chinese School he school: Class: approved. not approved. Student report of explanation. n of application (and medical	No.:needs to submit a document):	Principal Signature: _ Date: _	Leave Application
St. Joseph's Anglo- To be filled in by the Student Name: The application is Date of submission (Sick leave application)	Class: Class: approved. not approved. Student report of explanation. n of application (and medical tion needs to be submitted w	No.: needs to submit a document): ithin 3 days of retu	Principal Signature: Date: rning to school	Leave Application Leave Application
St. Joseph's Anglo- To be filled in by the Student Name: The application is Date of submission (Sick leave application described by the student of the submission of the subm	Class: Class: approved. not approved. Student report of explanation. n of application (and medical tion needs to be submitted was to personal reasons needs	No.: needs to submit a document): ithin 3 days of retues to be submitted 3	Principal Signature: Date: rning to school	Leave Application ol; application of nce.)
St. Joseph's Anglo- To be filled in by the Student Name: The application is Date of submission (Sick leave application leave of absence of the submission leave of the sub	Class: Class: approved. not approved. Student report of explanation. In of application (and medical tion needs to be submitted where the personal reasons needs to the student resonal reasons needs to the submitted where the personal reasons needs to the submitted where the personal reasons needs the perso	No.: needs to submit a document): ithin 3 days of retues to be submitted 3	Principal Signature: Date: rning to school	Leave Application Leave Application col; application of once.)
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St. Joseph's Anglo- To be filled in by the Student Name: The application is Date of submission (Sick leave application leave of absence of the control of t	Class: Class: approved. not approved. Student report of explanation. n of application (and medical tion needs to be submitted where the description of the complex of t	No.: needs to submit a document): ithin 3 days of retues to be submitted 3	Principal Signature: Date: rning to school days in advar	Leave Application Leave Application col; application of once.)
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St. Joseph's Anglo- To be filled in by the Student Name: The application is Date of submission (Sick leave applicate leave of absence of the company of the student Name: St. Joseph's Anglo- St. Joseph's Anglo- St. Joseph's Anglo- To be filled in by the Student Name:	Class: Class: approved. not approved. Student report of explanation. n of application (and medical tion needs to be submitted where the personal reasons needs elements. Chinese School he school: Class: Class:	No.: needs to submit a document): ithin 3 days of reture to be submitted 3 Receipt	Principal Signature: Date: rning to school days in advar	Leave Application Di; application of once.) Leave Application