**North South University**

**COE Form-6**

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|  | **Application Form for Leave Certificate** |  |

To

The Controller of Examinations

North South University

Bashundhara, Dhaka-1229

Sir,

1. I am requesting you to kindly issue me a **Leave Certificate** granting me leave of absence from \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ to \_ \_ \_ \_ \_ \_ \_ \_ \_. The purpose of my leave is as follows: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_

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2. **For this purpose my particulars are given below (Please write in Capital letter):**

a) Name of the Student (as per SSC/equivalent certificate) : **\_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_**

b) Student’s ID Number : **\_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_**

c) Father’s Name (as per SSC/ equivalent certificate) : **\_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_**

d) Mother’s Name (as per SSC/equivalent certificate) : **\_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_**

e) Date of Birth (as per SSC/equivalent certificate) : **\_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_**

f) Contact number :  **\_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_**

g) Nationality : \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_

h) Gender [Please tick Mark (√)]: 🞏 Male 🞏 Female

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|  |  | Yours Sincerely  Signature of the student with date: |

3**. Recommendation/Remarks of Department Chair/Program Director about his/her leave** (withparticular attention to examinations/important events of academic calendar)**:**

**Signature with date**

**Seal**

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| Clearance from NSU Accounts:  Signature: Date: |  | Clearance from Library:  Signature: Date: |

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| **✂** | - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - |

Signature of the receiving Officer with date: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ the date of delivery of the document on: \_ \_ \_ \_ \_ \_ \_ \_

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| **N.B:** | **➀ Please enclose attested photocopy of your SSC/ ‘O’ level /equivalent certificate. ➁Please pay Tk.100/- for each copy at Bank [United Commercial Bank Limited (UCB), Bashundhara Branch, Dhaka (beside GP House)], ➂ All *Clearance and recommendation must be obtained by the applicant.*** |