



第一部分 Section I			
個人資料 (由學生填寫) Personal Particulars (to be completed by student)			
姓名 Name	中文 Chinese		英文 English
學號 Student No	□ - □□ - □□□□□□ - □		主修 Major
聯絡電話 Telephone			

第二部分 Section II						
請假申請詳情 (由學生及有關導師填寫) Leave Application Details (to be completed by student and relevant course lecturers)						
缺席日期 Date(s) of leave	由 From	/ /	至 To	/ /	總日數 Total number of days	()
申請原因 Reason for application	<input type="checkbox"/> 病假 Sick Leave		<input type="checkbox"/> 恩恤假 Compassionate Leave			
	<input type="checkbox"/> 代表澳門特別行政區或澳門大學參與體育、文化、比賽、研討會、會議等活動 Participating in recognized event e.g. representing Macao SAR or UM in sports, cultural events, competition, seminar, conference, etc.		<input type="checkbox"/> 其他 (請註明) Others (please specify)			
(如有需要請另頁書寫 Please use supplementary sheet if necessary)						
*本人附上 () 頁信函及證明文件以支持本人的申請。 *I attach () page(s) of letters and documents in support of my application.						

在下列表格填上已經或將會缺席之科目 List in the table below the classes have been missed or will miss

課程編號 Course Code	班別 Section	課程名稱 Course Title	此欄由導師填寫 To be completed by Course Lecturers	
			請選出適用者 Please tick whichever is appropriate	導師簽署 Signed by Lecturer
			<input type="checkbox"/> 同意 Agree	<input type="checkbox"/> 不同意 Disagree
			<input type="checkbox"/> 同意 Agree	<input type="checkbox"/> 不同意 Disagree
			<input type="checkbox"/> 同意 Agree	<input type="checkbox"/> 不同意 Disagree
			<input type="checkbox"/> 同意 Agree	<input type="checkbox"/> 不同意 Disagree
			<input type="checkbox"/> 同意 Agree	<input type="checkbox"/> 不同意 Disagree

注意事項 Notes:

- * 學生必須附交相關信函及證明文件 Students must attach the letters and relevant supporting documents.
- 如申請不獲批准，學生將於三個工作天內收到通知 Students will be notified within 3 working days if this application is not approved.

本人聲明以上所述資料及相關證明文件，皆屬真實無誤。

I declare that all the information given above and relevant supporting documents enclosed are accurate and complete.

學生簽署: _____
Signature of Student: _____

日期: _____
Date: _____

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收件蓋印 Document Received Chop	<input type="checkbox"/> 批准 Approve <input type="checkbox"/> 不批准 Disapprove _____ 課程主任/部門主管簽名 Signature of Programme Coordinator / Dean of Academic Unit / /	備註 Remarks : _____ _____ _____ Informed student on: / / 學生已獲通知