

SPECIAL LEAVE FORM
(formulário de dispensa)

STUDENT'S DATA

name: _____
discipline: LIT INGL 4 LIT INGL 2 LIT AM 2
class: LEI LEJ group: 1 2 3 4 5

LEAVE DETAILS

1. ODD LEAVE

date of leave: ___/___/2010 date of request: ___/___/2010
class nr: R₁ R₂ R₃ R₄ R₅ R₆ R₇ R₈ R₉ R₁₀ _____
reason of leave: medical work other: _____
please, provide details:

(use back of page, if necessary)

2. REGULAR EARLY LEAVE

please, provide details:

(use back of page, if necessary)

TERMS AND CONDITIONS

I request that the grade granted to my group for the above reading class be added to my final average. I attach to the present form a photocopy of the certificate that confirms my petition and will show its original to the Professor upon the delivery of this form.

I understand the conditions for the acceptance of this request:

1. It is to be presented within the following 2 weeks of my leave or else it expires.
2. The reading grade might be granted but the attendance will not.
3. The Professor has the right to refuse the request if she finds the evidence(s) unsatisfactory.

Date: ___/___/2010

Your signature

TO THE PROFESSOR

The attached photocopy corresponds to the original document.

Professor's signature