

## The Hong Kong University of Science and Technology Academic Registry

## **Application for Leave from Study**

(for Undergraduate Students)

## Notes

- 1. Application for Leave from Study should be made prior to the beginning of a regular term, in which the leave from study status will become effective. Under exceptional circumstances, such as health issues, the leave period can commence at other times.
- 2. Request for Leave from Study requires approval of the relevant Dean, the Dean's Designate or the Director of IPO. Leave from Study cumulating to more than one academic year will normally not be considered.
- 3. Application for Leave in the current term within two weeks prior to the commencement of the final examination period will normally not be accepted.
- 4. Approved Leave from Study of a complete regular term will not count towards the time limit on program completion.
- 5. For students who have taken leave from study paying no tuition in a regular term i.e. Fall or Spring, a per-credit tuition fee will be charged when they resume study in the following Winter or Summer, with the maximum amount not exceeding the prevailing tuition for a regular term.
- 6. Tuition fee paid for the term for which Leave from Study is approved is not refundable or transferable.
- 7. Non-local students are reminded to obtain an appropriate visa to study in Hong Kong before their resumption of study.

## Application Procedures

- 1. Undergraduate students who wish to take Leave from Study should complete Sections I & II below, and submit the form with appropriate supporting documents to the program department for approval.
- 2. Students will be notified of the result of the application by the Academic Registry.

I.	Student Particulars								
	Student Name : (In English)	Student No. :							
	Program of Study :	Year of Study :							
	Contact Phone No. :								
II.	Application Details								
	Period of Leave from Study: From		Term, 20	20	_				
	То		Term, 20	20	_				
	Expected Time of Resumption of Study :	ected Time of Resumption of Study :							
	Reason for Leave from Study [please tick as appropriate]								
	a. Employment	a. Employment							
	b. Financial hardship (please approach SFAO for assistance if necessary)								
	c. Health (medical certificate enclosed, if a	Health (medical certificate enclosed, if any)							
	d. Heavy academic workload	Heavy academic workload							
	e. Join internship or co-op program	Join internship or co-op program							
	f. Join visiting program abroad (Name of	Join visiting program abroad (Name of University :)							
	g. Others (please specify):	g. Others (please specify):							

	Have you previously been granted Lea	ive from Study?	YES	NO							
	If yes, please state the leave period:										
	I declare that all the information given above is true and correct to the best of my knowledge.										
	Signatu	re of Student		D	ate						
	onal Information Collection Statement										
ii) T iii) F a	The personal data provided in this form will be upply the required data on this form. Your applicable personal data collected may be provided to more access or correction of the personal data after address: Academic Registry, Room 1381, http://www.ust.hk/privacy-policy.	ication may be delayed on ajor departments/ schoon submission of this form	or may not be considered ls, or relevant administra a, please contact the Acad	if the data submitted are tive offices for the above demic Registrar (email:	e incomplete. re mentioned purposes. arprog@ust.hk, Office						
III.	<b>Decision of Program Departmen</b>	<u>ıt</u>									
	The application is approved not approved										
	11 11	11									
	Effective Date of Leave : Year of Study upon Return :										
	Signature of UG Coordinato Program Director	or /	Name		Date						
	[Please pass this Form to the Dean's consecutive terms.]	office for endorseme	ent if the period of	leave from study is	for two or more						
137	Endament of Doon's Office										
IV.	Endorsement of Dean's Office	the application as	annuared by the Dro	aram Danartmant i	n Socian III						
	I endorse do not endorse the application as approved by the Program Department in Section III.										
	Signature of Dean / Dean's Designate Name Date										
	Signature of Dean / Dean's Des	ignate	Ivame	Name Dan							
V.	Academic Registry Use Only										
	Study to be Resumed in :										
į											
	Result Received On	Student Notified		Computer Re	cord Updated						
		by	on	by	on						
	Remarks:										