

HUMAN RESOURCE APPLICATION FOR STUDY LEAVE

This application form should be completed in triplicate and submitted to the office of the Vice-Chancellor at least 30 days before commencement of study leave.

•							
1. Name:	P/FNo						
Date of appointment:	Designation	l					
Date of Confirmation:							
School/Department/Section:							
2. I wish to apply for study leave from the University from to							
	to enable me pursu	e					
at							
3. Sponsor							
4. Since joining the University	ity, I have been granted the fol	lowing study leave(s):					
STUDY LEAVE PERIOD	PLACE OF STUDY	COURSE (CERT/MASTERS/PHD, ETC)					
•	-	levance of the training to the					
Impact of applicant's absence	from the /section						
acommand/Do not recommand	ctudy lagya						
ecommend/Do not recommend	•						
ignature	Date						

6.	Comments by Head of Department
I	Recommend/ Do not recommend study leave
	Reasons for not recommending
••••	
7.	Recommendations by the Staff Development Committee
	Recommended/Not Recommended
	Signature
	Date
8.	APROVED /NOT APPROVED BY VICE-CHANCELLOR, RONGO UNIVERSITY
Reaso	ns for non-approval
Copie	s to:
Vice-0	Chancellor
	Deputy Vice-Chancellor (AFP)
	Deputy Vice-Chancellor (ASA)
	Head of Unit