



International Indian School, Jeddah
Leave Application Form

Name of the Student _____

Class _____ Section _____ SR No. _____

Leave requested - From _____ To _____ Number of Days _____

Reason for requested leave:

Supporting Documents attached:

Father's Name _____

Mobile No. _____ Email Id _____

Signature _____ Date _____

For Office Use

Remarks of the Class Teacher

Remarks of the Headmaster / Headmistress

Name _____ Signature _____

Remarks of the Vice Principal

Name _____ Signature _____

Leave Approved / Regretted
