



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. Tuition fee paid for the term for which Leave from Study is approved is not refundable or transferable.

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 : _____ Student No. :

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(In English)

Program of Study : _____ Year of Study :

Contact Phone No. : _____

II. Application Details

Period of Leave from Study : From _____ Term, 20____ - 20____
 To _____ Term, 20____ - 20____

Expected Time of Resumption of Study : _____ Term, 20____ - 20____

Reason for Leave from Study [please tick as appropriate]

- a. Employment
- b. Financial hardship (*please approach SFAO for assistance if necessary*)
- c. Health (*medical certificate enclosed, if any*)
- d. Heavy academic workload
- e. Join internship or co-op program
- f. Join visiting program abroad (Name of University : _____)
- g. Others (*please specify*) : _____
-

Have you previously been granted Leave 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.

Signature of Student

Date

Personal Information Collection Statement

- i) The personal data provided in this form will be used for checking of records and processing this application only. It is obligatory for you to supply the required data on this form. Your application may be delayed or may not be considered if the data submitted are incomplete.
- ii) The personal data collected may be provided to major departments/ schools, or relevant administrative offices for the above mentioned purposes.
- iii) For access or correction of the personal data after submission of this form, please contact the Academic Registrar (email: progreg@ust.hk, Office address: Academic Registry, Room 1381, Academic Building, HKUST). For the University's Privacy Policy, please refer to <http://www.ust.hk/privacy-policy>.

III. Decision of Program Department

The application is approved not approved

Effective Date of Leave : _____ Year of Study upon Return :

Signature of UG Coordinator /
Program Director

Name

Date

[Please pass this Form to the Dean's office for endorsement if the period of leave from study is for two or more consecutive terms.]

IV. Endorsement of Dean's Office

I endorse do not endorse the application as approved by the Program Department in Section III.

Signature of Dean / Dean's Designate

Name

Date

V. Academic Registry Use Only

Study to be Resumed in : _____

Result Received On	Student Notified		Computer Record Updated	
	by	on	by	on
Remarks :				