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Level 3, 16 Waverley St, Auckland 1141, New Zealand Tel 64 9 377 1395 Web www.imperial.ac.nz Email principal@imperial.ac.nz

## NOTIFICATION OF ABSENCE

Please compete this form on the first day you return to school after you have been absent and give in at reception.

Date		Student ID Number	
Given Name		Family Name	
English Name, if applicable		Programme	Level/Class: Tutor:
Contact details	Email: Mobile:		
Period of Absence	From to	Visa Status	
Reason	Please note: A If reason for absence is sickness/ac (i) Attach medical; (ii) Attach ACC form if you hav	ccident:	<b>cy will be followed</b>
Signature			

## For Office Use Only

Staff		
Enrolpro	Date Entered:       Entered by:	
YES/NO	<ul> <li>The student is provided with appropriate advice for insurance claims or any other assistance requested or identified by staff.</li> </ul>	

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