



ARELLANO UNIVERSITY SCHOOL OF LAW



Taft Avenue corner Menlo Street, Pasay City, Philippines

APPLICATION FOR LEAVE OF ABSENCE (LOA)		CLEARANCE
	Date	Accounting: By:
Atty. Domingo M. Navarro Dean		Date: Remarks:
	a student v as (Year Level) with am applying for a leave of absence for the	
		Library: By:
and	for the inclusive semester/s of	Date: Remarks:
NOTE: This application is the clearance issued by the Accounting Office attesting		
that I have no outstanding obligation with any department of the school. Upon my re-enrollment my General Weighted Average (GWA) will be computed		Office of Student Affairs: By:
to determine if I am eligible for re-enrollment. The Dean's Office has the sole discretion to determine the curriculum to		Date: Remarks:
apply on my re-enrollment		
REASON/s:		Medical: By:
		Date: Remarks:
		Audio Visual: By:
	Signature over printed name	Date: Remarks:
Attested by:		
		Guidance: By:
Registrar's Office	Dean	Date: Remarks:
	REGISTRAR'S COPY	