

Residential Halls Leave Form

Student Residential Life Department
PO Box 26666, Sharjah, UAE
Tel +971 6 515 2434
res-halls@aus.edu

Student Details

Name:

Student ID:

Gender:

☐

Male

☐

Female

Nationality:

Residential Hall:

Room Number:

Specify Period of Temporary Absence from Residential Halls

☐

Weekends (staying out of the residential Halls from Thursday to Saturday)

☐

Official Holidays

Contact Details During Temporary Absence

Telephone: +(

Telephone (Mobile): +()

Address during absence:

Name of contact person during absence:

Parent/Guardian Information

By signing this, I, the parent/guardian of the aforementioned student, authorize him/her to stay outside the residential halls during the weekends/public holidays. This authorization will remain valid for the entire period of stay unless I send a notification stating the contrary (cancellation of this form) to the Student Residential Life Department.

Name:

Relationship:

Telephone: +(

Telephone (Mobile): +()

Email:

Fax: +()

Signature of Parent/Guardian:

Date:

Approval

Student Residential Life Official:

Date: