



TUMS-IC

Office of the Vice President for Research Affairs

Request Form for Leave of Absence (LOA) During Research Phase

Student's Information

First Name:	Last Name:
Program:	School:
Nationality:	Passport Number:
Date of entry to the program:	Student Number:

Hereby, I _____ am requesting for a leave of absence
starting from _____ until _____.

Reason for leave (Explain):

Student's Signature: _____ **Date:** _____

Dean of Department / School: Approved Disapproved

Name and Signature: _____ **Date:** _____

TUMS-IC VP for Research Affairs: Approved Disapproved

Name and Signature: _____ **Date:** _____

Note: In order to request for a LOA during their research phase, students must *complete this form, sign it and submit it* to the Office of the Vice President for Research Affairs through e-mail or by person.

Our e-mail address: b-izadivar@farabi.tums.ac.ir