**Wenzao Ursuline University of Languages**

**Application for Leave from Important Meetings**

Date of Application： (yr.) (m.) (d.)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Applicant’s Signature |  | Department |  | Position |  |
| Meeting Title | Student Affairs Meeting |
| Meeting Date | (yyyy) (mm) (dd) |
| Reasons |  |
| Deputy’s Signature |  |
| Head of Department’s Signature |  |
| Office / Departmental Meeting Representative’s Signature |  |
| Meeting Chairperson’s Signature |  |

**Procedure：**

**Applicant→ Deputy→ Head of Department→ Office / Departmental Representative→ Meeting Chairperson**