Princeton Community Japanese Language School

Request for Leave of Absence (JASL Program)

Date: _____

STUDENT INFORMATION

Student Name:		Date of Birth: M / F
Enrolled Course:		Grade:
Teacher:		Elective Math Class Yes / No
Other Elective Class: Yes / No	If yes, class title:	
Last Day of Class:	Month: Day: Year:	
Returning Date:	Month: Day: Year:	
Reason for Leave of Absence:		

PARENT / GUARDIAN INFORMATION

Name of Parent / Guardian:	
Current Address:	
Telephone Number: ( ) -	Email Address: @

- Tuition is payable in full for semester. There is no refund of tuition for leave of absences.
- Complete this form as soon as your plans are clear and submit it to the PCJLS office.
- When returning from a leave of absence, complete the appropriate form for reinstatement by making a request to the PCJLS office. In such cases, you have to pay $30 for registration fee.

部　長	ﾃﾞｨﾚｸﾀｰ	事務長	事　務	会　計	日曜事務