

福建医科大学来华留学实习生请假单(科室联)

Application for Leave of intern in Fujian Medical University

(For Department)

学号 Student No.		姓名 Name	
实习医院 Hospital		实习科室 Department	
联系电话Phone number			
请假时间 Leaving Period	从From: _____ 至to: _____ 共In total: _____ 天Days		
请假原因Reasons of Leave:			
学生签名Signature:_____ 日期Date:_____			
带教老师意见Opinions of Teacher:			
签名Signature:_____ 日期Date:_____			
科室意见Opinions of Department:			
签章Signature or Stamp:_____ 日期Date:_____			
海外辅导员意见Opinions of Advisor:			
辅导员签字 Advisor Signature:_____ 日期Date:_____			
教学办意见Opinions of Teaching Affairs Office:			
签章Signature or Stamp:_____ 日期Date:_____			
海外学院意见Opinions of the OEC:			
签章Dean’s Signature or Stamp:_____ 日期Date:_____			

填表说明：（1）本表应附学生本人申请有关证明，如：医院诊断书等；（2）请假申请获得批准后方可离开，并在指定时间返校销假，否则作无故旷课处理，按照相关规定给予处分。  
Notes: (1) Related certificates, such as medical certificate, etc, need to be attached to this application; (2) Students approved to leave are required to return and report back on the due time, or will be punished by relative disciplinary actions.

福建医科大学来华留学实习生请假单(教学办联)

Application for Leave of intern in Fujian Medical University

(For Teaching Affairs Office)

学号 Student No.		姓名 Name	
实习医院 Hospital		实习科室 Department	
联系电话Phone number			
请假时间 Leaving Period	从From: _____ 至to: _____ 共In total: _____ 天Days		
请假原因Reasons of Leave:			
学生签名Signature:_____ 日期Date:_____			
带教老师意见Opinions of Teacher:			
签名Signature:_____ 日期Date:_____			
科室意见Opinions of Department:			
签章Signature or Stamp:_____ 日期Date:_____			
海外辅导员意见Opinions of Advisor:			
辅导员签字 Advisor Signature:_____ 日期Date:_____			
教学办意见Opinions of Teaching Affairs Office:			
签章Signature or Stamp:_____ 日期Date:_____			
海外学院意见Opinions of the OEC:			
签章Dean’s Signature or Stamp:_____ 日期Date:_____			

填表说明：（1）本表应附学生本人申请有关证明，如：医院诊断书等；（2）请假申请获得批准后方可离开，并在指定时间返校销假，否则作无故旷课处理，按照相关规定给予处分。  
Notes: (1) Related certificates, such as medical certificate, etc, need to be attached to this application; (2) Students approved to leave are required to return and report back on the due time, or will be punished by relative disciplinary actions.

福建医科大学来华留学实习生请假单(学院联)

Application for Leave of intern in Fujian Medical University

(For OEC)

学号 Student No.		姓名 Name	
实习医院 Hospital		实习科室 Department	
联系电话Phone number			
请假时间 Leaving Period	从From: _____ 至to: _____ 共In total: _____ 天Days		
请假原因Reasons of Leave:			
学生签名Signature:_____ 日期Date:_____			
带教老师意见Opinions of Teacher:			
签名Signature:_____ 日期Date:_____			
科室意见Opinions of Department:			
签章Signature or Stamp:_____ 日期Date:_____			
海外辅导员意见Opinions of Advisor:			
辅导员签字 Advisor Signature:_____ 日期Date:_____			
教学办意见Opinions of Teaching Affairs Office:			
签章Signature or Stamp:_____ 日期Date:_____			
海外学院意见Opinions of the OEC:			
签章Dean’s Signature or Stamp:_____ 日期Date:_____			

填表说明：（1）本表应附学生本人申请有关证明，如：医院诊断书等；（2）请假申请获得批准后方可离开，并在指定时间返校销假，否则作无故旷课处理，按照相关规定给予处分。  
Notes: (1) Related certificates, such as medical certificate, etc, need to be attached to this application; (2) Students approved to leave are required to return and report back on the due time, or will be punished by relative disciplinary actions.

福建医科大学来华留学实习生销假单

Application for Leave Clearance of intern in Fujian Medical University

学号 Student No.		姓名 Name		请假时间 Leaving Period	从From: _____ 至to: _____ 共In total: _____ 天Days	返回时间 Back Time	日期 Date:_____
教研室主任签章Signature or Stamp of dean of Teaching Affairs Office:_____ 日期 Date:_____							
填表说明：假期满上班时由带教老师填写上班日期，教研室（组）主任签字后由学生本人交到教学办处。 Notes:The back time should be filled by the teacher in the department and signed by the dean of Teaching Affairs Office.Students need to deliver this to the Teaching Affairs Office personally.							