

## Student visa sponsored – postgraduate research student annual leave request

Please note that the University of Southampton is a Student Sponsor and must comply with the attendance regulations set by the UKVI.

**Sections 1& 2** – To be completed by student requesting annual leave. Please complete both of these sections and, once your Supervisor has completed **Section 3**, submit this form to your Graduate School Office for processing. If you are combining remote study and annual leave then please use the ‘Student visa sponsored – postgraduate research remote study request form’.

Postgraduate research students are permitted 26 days annual leave excluding University closure days and bank holidays. The leave year runs from 1 August to 31 July; if you commence your research part way through the academic year, your annual leave allowance will be calculated on a pro-rata basis.

**Section 1** – To be completed by student, details of absence.

<b>Student name</b>	
<b>Student ID</b>	
<b>Annual leave start date</b>	
<b>Annual leave end date</b>	
<b>Number of days annual leave requested</b>	
<b>Annual leave remaining</b>	
<b>Will you leave the UK?</b>	

You must return to the University by the date agreed by the University. ***If you do not return by this date, your absence will become un-authorised and your Student sponsorship could be put at risk.***

**Section 2** – Student declaration

I certify that the information given above is correct to the best of my knowledge:

<b>Signed</b>	
<b>Date</b>	

If your absence is authorised, you will receive written confirmation of this.

/Continued

**Section 3** - To be completed by the students Supervisor.

Please complete this section and return to the student for submission to their Graduate School Office.

- I confirm that this period of leave does not exceed the students annual leave allowance.
  
- I **do not** support their application for annual leave as this would exceed their permitted annual leave allowance and/or I consider that this period of absence will have a detrimental effect on their candidature.

<b>Name of Supervisor (please print)</b>	
<b>Comment</b>	
<b>Signed</b>	
<b>Date</b>	

**Section 4** - To be completed by the students Graduate School Office. Please complete this section and forward this form to [visa@soton.ac.uk](mailto:visa@soton.ac.uk)

- Annual leave within permitted allowance.

<b>Name (please print)</b>	
<b>Signed</b>	
<b>Date</b>	