**AL3 Student authorised absence/travel letter**

Tel:

Email:

Date:

To Whom It May Concern

**Re: Confirmation of Authorised Absence from Studies**

This is to certify that the student below is fully enrolled at this University.

|  |  |
| --- | --- |
| **Name of Student:** |  |
| **Title of Programme:**  |  |
| **Level of Programme:**  |  |
| **Mode of Attendance:**  |  |
| **Passport Number:**  |  |
| **Sponsor Name and Licence Number:**  | Keep/delete as appropriate to student’s campus: University of Wales Trinity Saint David, Licence number 3XDAP7BH7  |
| **Home Office Sponsor Status:** | Tier 4 Sponsor status (Premium) |

The student commenced the programme on \_\_\_\_\_\_\_\_and is expected to complete his or her studies on \_\_\_\_\_\_\_\_\_\_\_.

The student has been given authorised absence by this University from \_\_\_\_\_\_\_\_\_ until \_\_\_\_\_\_\_\_\_\_\_\_ when he or she is expected to resume his or her studies and meet the attendance and progress requirements to comply with the terms and conditions of his or her Tier 4 visa.

If you require any further information regarding the above, please do not hesitate to contact me.

Yours faithfully

*Insert name here*

Programme Director