**Medical Absence Request Form**

27/08/2020



*Please send all appropriate Medical Certificates to your University Graduate School/Doctoral College (or equivalent) – these do not need to be provided to the ARIES Office.*

Please complete this form and send it to [aries.dtp@uea.ac.uk](mailto:aries.dtp@uea.ac.uk)



|  |  |  |
| --- | --- | --- |
| Name |  | |
| Select your University of Registration | | Select your Host Insitute (if applicable) |
| First Date of Medical Absence | | Click or tap to enter a date. |
| Last Date of Medical Absence  (as stated on Medical Certificate) | | Click or tap to enter a date. |