

Leave of absence application form

Relevant Standards SRTO 2015: 1.7, 5.2 The National Code 2018: Standard 2.1.8, 9		Linked Documents Deferral, Suspension, and Cancellation of Enrolment Policy Student Code of Conduct Academic and General Misconduct Policy Students Complaints and Appeals Policy Withdrawal from Course Form				
Student Details						
Name				Student ID		
Contact Phone						
Course/Group						
NOTE: Your requested leave of compelling circumstances require			_	• •	-	
Leave Required/Period	From				Total Number	
					f Days	
Reason(s) for taking Leave (Please provide as much details as possible) Note: Attach any supporting documents with this form as applicable						
Student Declaration and Signature	All the information I have provided in this form is true and accurate. I also understand that this leave of absence may impact upon my course progress.					
	Signed:			Date:	Date:	
ADMIN use only						
Received by			Date:			
Decision	Leave Granted		From	to		
	Leave Not Granted		Reason:			
Signature		1		Da	te:	
Follow-up Action	If granted, forward the s record. If declined, advis				update of st	udent