

### STUDENT LEAVE FORM

Student Details:

Family name: \_\_\_\_\_ Given name(s): \_\_\_\_\_

Student ID: \_\_\_\_\_

Current street address: \_\_\_\_\_

State: QLD Post code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

I wish to apply for leave from \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_

Reason \_\_\_\_\_

\_\_\_\_\_

Documented proof **MUST** be attached with this form (Please tick):

Medical certificate       Death certificate       Other

I am aware that I will need to inform the College in advance (minimum 2 working days) if I need to extend my leave or this will be marked as an absence, which will affect my attendance.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**For Office use only:**

I am aware and have approved/ disapproved leave/s during the academic year to the student as mentioned above.

CEO signature: \_\_\_\_\_

Date: \_\_\_\_\_