



International Leave of Absence Form

Section A – Student Details

Family Name	Given name		
Email		Date of birth	
Student ID	Mobile		
Address (in Australia)	State	Postcode A T J v 6. (i) an s (f 7 Act	

Reason for Leave of Absence

Leave of Absence start date	Returning Student Period/Year	Signature of student	Date
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Section C – Office Use

I understand and accept that:

Compassionate and compelling circumstances demonstrated

Supporting document provided

New study plan received from the school and communicated with the student

Approved

Studies must resume by session/year:

Not approved

Comments

Authorised by (please print)	Signed	Date
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