

Leave of Absence



## **Request Form**

Jasmine Education Group Pty Ltd t/a Queen Anne English College - Queen Anne Business College

ABN: 551320089025 | National Provider Code: 40458 | CRICOS Provider Code: 03240D

Bankstown Campus: Level 1, 49 Raymond Street, Bankstown NSW 2200 | Sydney City Campus: Level 4,225 Clarence Street, Sydney, NSW 2000 Phone: (02) 97074840 Email: admin@qaec.nsw.edu.au | Website: www.qaec.nsw.ed<u>u.au</u>

## 1. Student details

Full Name :								ID :		
Course :						Start :			End :	
Phone :				E-mo	ail :					
Leave start date	):					Leave e	end date :			
Please update n	ny (	contacts as above :	Yes		No					
2. Reason for leave of absence:										
	-									

## 3. Supporting documents attached

(Form/Request should be supported with one or more of below documents)

	Medical Certificate	Police Report / Certificate			
	Other (please specify)	Travel Ticket			
Stude signa		Date :			

Office use only

Task
Staff
Date

Received by
Declined
Image: Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2"Co

	Leave of absence request form	Jasmine Education Group Version 3.5				
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Authorised by CEO		Page 1 of 1				