Leave Request Form

Student Name:	
Course Name:	
First date of leave:	
Date returning to classroom:	
Total Days:	

Reason for leave *(attach supporting evidence)*

Student Declaration

- The information provided by me is true and correct
- I have read and understood the process of applying for Leave
- I have attached supporting documents as required by the form

Students' Signature		Date:	

Trainer approval

Comments:

Trainers' Signature		Date:	

RTO Manager approval

Comments:

RTO Manager Signature		Date:	