## MAGILL

## Magill College Pty Ltd Trading as Magill College Sydney

ABN: 67 090 050 990

CRICOS Provider Code: 01994M RTO No: 91367

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## **HOLIDAY REQUEST FORM**

Student No:					
Family Name:			Given Name:		
Tel/Mobile:			Email:		
Address: (within Australia)					
Course (Please tick ☑):  BSB30115 Certificate III in Business  □ BSB50215 Diploma of Business □ BSB60215 Advanced Diploma of Business □ BSB42415 Certificate IV in Marketing and Communication □ BSB52415 Diploma of Marketing and Communication □ BSB61315 Advanced Diploma of Marketing and Communication					
Holiday Dates Requested:		From: _		To:	
Reason(s) for H	Ioliday Request:				
Do you require a Holiday Confirmation Email?			☐ Yes	□ No	
Student Signature:			Date:		
OFFICE USE ONLY					
	APPROVED	□ NOT A	APPROVED	☐ IN PENDING	
General Holiday				Approved Holiday	
From:	To:			To:	
From: To:		:	From: To:		
☐ Confirmation	n of general holiday		☐ Medical reasons		
☐ Travelling ov			☐ Family emergencies		
☐ Other:			☐ Legal reasons		
☐ Other:					
The student is	under the obligatio	ns as indicated:			
$\square$ Prior to departure from Sydney, student must ensure that <u>tuition fees</u> are paid					
$\square$ Prior to departure from Sydney, student must complete and submit all required <u>assessments</u> due					
$\Box$ Upon arrival back in Sydney, student must bring their passport, travel itinerary, plane ticket and boarding pass (if applicable) to the administration office					
$\Box$ Upon arrival back in Sydney, student must bring provide the relevant medical certificate, death certificate or any other supporting documents to the administration office					
COMMENT:					