



Magill College Pty Ltd Trading as Magill College Sydney

ABN: 67 090 050 990

CRICOS Provider Code: 01994M RTO No: 91367

Tel: (+61 2) 8061 6980 Fax: (+61 2) 9267 1711 www.magill.edu.au

HOLIDAY REQUEST FORM

| | | | |
|--|--|---|--|
| Student No: | | | |
| Family Name: | | Given Name: | |
| Email: | | Tel/Mobile: | |
| Address: (within Australia) | | | |
| Course (Please tick <input checked="" type="checkbox"/>): | <input type="checkbox"/> BSB30115 Certificate III in Business | <input type="checkbox"/> BSB42415 Certificate IV in Marketing and Communication | |
| | <input type="checkbox"/> BSB40215 Certificate IV in Business | <input type="checkbox"/> BSB52415 Diploma of Marketing and Communication | |
| | <input type="checkbox"/> BSB50215 Diploma of Business | <input type="checkbox"/> BSB61315 Advanced Diploma of Marketing and Communication | |
| | <input type="checkbox"/> BSB60215 Advanced Diploma of Business | | |
| Holiday Dates Requested: | From: _____ To: _____ | | |
| Reason(s) for Holiday Request: | | | |
| Do you require a Holiday Confirmation Email? | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

DETAILS OF HOME COUNTRY

| | | | |
|--------------------------------|--|------------------------------|--|
| Full Address: | | | |
| Telephone Number: | | Mobile: | |
| Emergency Contact Name: | | Emergency Contact No: | |
| Student Signature: | | Date: | |

OFFICE USE ONLY

| | | | |
|--|---------------------------------------|--|------------------------------------|
| <input type="checkbox"/> APPROVED | <input type="checkbox"/> NOT APPROVED | <input type="checkbox"/> PENDING | <input type="checkbox"/> CANCELLED |
| General Holiday | | Approved Holiday | |
| From: _____ To: _____ From: _____ To: _____ | | From: _____ To: _____ From: _____ To: _____ | |
| <input type="checkbox"/> Confirmation of general holiday <input type="checkbox"/> Travelling overseas <input type="checkbox"/> Other: _____ | | <input type="checkbox"/> Medical reasons <input type="checkbox"/> Legal reasons <input type="checkbox"/> Family emergencies <input type="checkbox"/> Religious reasons <input type="checkbox"/> Attend children overseas <input type="checkbox"/> Other: _____ | |
| ALL EVIDENCE REQUIRED AS BELOW MUST BE SUBMITTED <i>WITHIN 5 WORKING DAYS OF ARRIVAL</i>. FAILURE TO DO SO, YOUR HOLIDAY MAY BE CANCELLED. The student is under the obligations as indicated: <input type="checkbox"/> Prior to departure from Sydney, student must ensure that <u>tuition fees</u> are paid <input type="checkbox"/> Prior to departure from Sydney, student must complete and submit all required <u>assessments</u> due <input type="checkbox"/> Upon arrival back in Sydney, student must bring their passport, travel itinerary, plane ticket and boarding pass (if applicable) to the administration office <input type="checkbox"/> Upon arrival back in Sydney, student must bring provide the relevant medical certificate, death certificate or any other supporting documents to the administration office | | Late Submission allowed YES <input type="checkbox"/> NO <input type="checkbox"/> Year _____ Term _____ Block _____ or specific unit _____ Submit by _____ Signature _____ | |

| | | | |
|--|--|--------------|--|
| COMMENT: | | | |
| SIGNATURE OF AUTHORISED PERSON: | | DATE: | |