PIONEER COLLEGE
RTO: 45763 CRICOS: 03956A

LEAVE REQUEST FORM

Kindly fill out this form and send it to the Student Support Department, either by email: studentservices@pioneercollege.edu.au or by handing in a physical copy at the front desk.

Upon receipt, all requests require a minimum of 1–3 business days to process. However, processing times may be extended depending on request complexity, volume, or institutional constraints. **Urgent requests are not guaranteed expedited processing and will be reviewed at the discretion of the relevant department.**

1. STUDENT DETAILS			
Student Full Name:		**Student ID:**	
Email Address:		**Contact No.:**	
Enrolled Course Code and Course Title:			

2. REQUEST DETAILS ***(Please fill in the relevant details and provide supporting documents)***

IMPORTANT NOTE:
Leave may be approved only for circumstances that meet compelling and compassionate criteria, such as verified medical emergencies or genuine visa-related matters. Personal events, including weddings, family functions and holidays, are generally **NOT** considered eligible grounds for leave approval.

Supporting Documents are COMPULSORY.

Leave Start date:		**Leave End date:**	
No. of days requested:			
Reason for leave:			
Supporting Documents (Attached as Evidence)	1.		
	2.		
	3.		
	4.		
	5.		

3. STUDENT DECLARATION

- *I acknowledge the details and supporting documents I provided above are correct and genuine.*
- *I acknowledge that this leave request is subject to college approval and is not automatically granted.*
- *I understand and am aware that by taking this leave, it may affect my attendance, grades, student visa and other student obligations.*
- *I take full responsibility for any consequences arising from my absence.*

Student's Signature:		**Date:**	

4. FOR OFFICE USE ONLY			
Processed By:		**Office Signature:**	
Date Received:		**Date Processed:**	
Request Outcome:	☐ Approved ☐ Denied ☐ Deferred		
Approved Leave Dates (if any):			
Comment(s):			