

Student Details

Student Number _____

Surname/Family Name _____

Given Name(s) _____

Visa Type Student Working holiday Tourist Other

Email _____

(Email address must be provided)

Leave (Holidays) Request

Leave start date / /

Leave end date / /

Current course Day Evening

-
- Cambridge:
-
- On-Demand
-
- KET
-
- PET
-
- FCE
-
- CAE
-
-
- EAP or EVS
-
-
- English for Business
-
-
- General English
-
-
- IELTS Preparation
-
-
- Pronunciation in context
-
-
- English+ Creative Technology

Holiday duration **Weeks** _____

Return date / /

Reason for request comments

Declaration/Signature - I understand and agree that:

- 1- Requests must be submitted at least 5 working days before the requested change date
- 2- Changes to my enrolment may affect the status and validity of my visa. I should contact Department of Home Affairs for further information
- 3- Requests for changes to fixed entry courses (all courses excluding General English and IELTS Preparation) are the discretion of Greenwich English College. Fees May apply in accordance with the terms and conditions of enrolment
- 4- Maximum leave periods apply depending on the type and the length of the enrollment
 - a. Student visa (1-4 weeks)
 - b. Working holiday/Tourist visa/Other visa (1-7 weeks)
 - c. Working holiday/Tourist visa/Other visa (8-24 weeks - subject to a \$10 change fee)
- 5- If you fail to return on the specified Return Date, then fees may apply in accordance with the terms and conditions of enrolment
7. The outcome of my request will be advised to me by email within 5 working days (if you have not heard from us within 5 working days, please contact the college)
8. The outcome of my leave request is not final until I have received an email from the college. If my request is not approved, I will be expected to attend classes for the period specified on this form. Fees may apply in accordance with the terms and conditions of enrolment
9. All requests are subject to approval and will be at the discretion of Greenwich English College

Student Signature _____ **Date** / /

Office use only

Received by _____

Date / /

Processed by _____

Date / /

Fees Due \$ _____

Visa/Study Status Check Yes No

Comments _____

Management
Date / /

Management Signature**Leave Approved** Yes No

 Student emailed outcome of request

Date / /

Admissions (Print name)

 Student Paid Copy in SMS

Date / /

Admissions (Print name)

 Changes made in SMS

Form must be completed in full. Incomplete forms will not be processed