

# LEAVE REQUEST FORM



<b>Student Name:</b>			
<b>Student ID:</b>			
<b>Course Name:</b>			
<b>First date of leave:</b>			
<b>Date returning to classroom:</b>			
<b>Total Days:</b>			
<b>Reason for leave</b>			
<b>Students' Signature</b>		<b>Date:</b>	
<b>Trainer's approval</b>			
<b>Comments:</b>			
<b>Trainers' Signature</b>		<b>Date:</b>	
<b>RTO Manager approval</b>			
<b>Comments:</b>			
<b>RTO Manager Signature</b>		<b>Date:</b>	
<b>Date Entered into Student Management System</b>			