

Date:

☐ Student advised: Date:



Please email this form + your medical certificate or other evidence directly to enquiries@unswglobal.unsw.edu.au

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STUDENT DETAILS: (please use CAPITAL	ieπers)		ed when a student requests leave	
		have commenced the	e course and the enrolment is to be	e temporarily paused.
Student ID Number				
amily Name		Given Name		
Address				
CURRENT ENROLMENT DETAILS: (tic	k appropriate box)			
UNSW Foundation Studies □Academic Er	nglish Programs			
ourse Enrolled (eg: Standard / Std Plus / PFY / GPE) Term / Intak	e / Year (eg: Jan/2018)	Class Group (eg. FEE	Cx1)
ATE FOR LEAVE OF ABSENCE / TE	MPORARILY SUS	PENSION OF ENRO	DLMENT:	
From T	0		Number of days	
/ill you be in Australia over this period?	77.70	es <i>□</i> No		
If your answer is 'NO', and your absorber			e a copy of your airline t	icket.
re you under 18 years of age?		es <i>□</i> No		
If your answer is 'YES', you must atta re you a sponsored/scholarship student	-	ır parent/guardian sup es	pporting your application	for taking Leave of Abs
re you a sponsored/scholarship student	<i>:</i> 1	es 🗀 NO		
EASON FOR TAKING LEAVE OF AE	SENCE			
this form. Contact DHA by phone on 131 881	or consult their website	at https://immi.homeaffairs	s.gov.au/	visa information before submit
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