

To the Employer

I am an international student holding a current student visa.

As the holder of a student visa my dependent family members and I are able to work in Australia.

The work conditions of my student visa permit me and my dependent family members to work the following hours **once I have commenced my course of study:**

	STUDENT		DEPENDENT FAMILY MEMBERS	
	During Semester Period (ie. when a course is "in session")	During Semester Break Period (ie. when a course is "out of session")	During Semester Period	During Semester Break Period
Bachelor/Graduate Certificate/Graduate Diploma	Up to 48 Hours (maximum) per Fortnight	Unlimited Hours	Up to 48 Hours per Fortnight	Up to 48 Hours per Fortnight
Masters by Coursework	Up to 48 Hours per Fortnight	Unlimited Hours	Unlimited Hours	Unlimited Hours
Masters by research/PhD	Unlimited Hours	Unlimited Hours	Unlimited Hours	Unlimited Hours

For detailed information, please visit the [Department of Home Affairs' website](#).

I am enrolled in a course of study at Flinders University and have commenced that course.

Flinders University key dates are available on the [Flinders University website](#).

2026 Official University Key Dates	
Semester 1 commences	2 March 2026
Mid-Semester break Semester 1	13-24 April 2026
Mid-year break	6-24 July 2026
Semester 2 commences	27 July 2026
Mid-Semester break Semester 2	21 September 2026 to 2 October 2026
Final break commences	23 November 2026
Semester 1 commences	1 March 2027

If I am enrolled in a non-semester topic during a Semester Break Period I will disclose this to you and limit my work hours to a maximum of 48 hours per fortnight during that period.

I DECLARE that the contents of this form are true and correct, and that I am bound by, and will comply with, the student visa work conditions described in this form.

Compliance with the work conditions in my student visa, including determining when my course is in session or out of session for the purposes of calculating my correct work hours entitlement, is my full and complete responsibility.

Full name: _____

Flinders University Student ID #: _____

Signature: _____

Date: _____