

ANU COLLEGE OF BUSINESS AND ECONOMICS

Application for Leave of Absence from Honours Program for Domestic Students

1. Personal Details

Family Name: <input style="width: 90%;" type="text"/> Given Names: <input style="width: 90%;" type="text"/> Do you have a Scholarship? Yes <input type="checkbox"/> No <input type="checkbox"/>	Uni ID: <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">U</td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td></tr></table> Phone (Day): <input style="width: 90%;" type="text"/>	U							
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Please note that a leave of absence from your programs may have implications for your scholarship									
Enrolment Load Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Honours Program: <input style="width: 90%;" type="text"/>	Honours Supervisor: <input style="width: 90%;" type="text"/> Honours Convenor: <input style="width: 90%;" type="text"/>								

2. Information about this application

- This application is to be submitted to your College Student Administration Office;
- This application is to be submitted before the period for which the program leave of absence is being sought;
- International students should not complete this form unless the College Office has advised that it is appropriate to do so;
- The maximum period of leave that may be sought on personal grounds is 12 months. A further period, normally of not more than 12 months in total, may be sought if you are experiencing circumstances beyond your control. Please consult your College Office if this program leave of absence would result in the aggregate of 2 years being exceeded;
- Students applying for leave should be aware that their current supervisor may not be available the full duration of their program if leave is granted and the program completion date extended.
- If the reason for the leave request is medical/maternity, original supporting documents (or certified copies) must be attached to this application.
- Scholarship holders requesting leave from their Honours Program should consult the *Conditions of Award* for your scholarship entitlements.

3. Leave Request

I wish to apply for a program/scholarship leave of absence from

D	D	M	M	Y	Y
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 to

D	D	M	M	Y	Y
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 (date you will return)

Please attach a letter or supporting documents regarding your reason for your leave request.

4. Applicant Declaration

I certify that the information supplied by me on this form is complete and true. I have read the relevant sections of the *Undergraduate Awards Rules* and the *Conditions of Award* for my scholarship (if applicable). I have discussed my progress with my honours convenor/supervisor before submitting this request.

Student's signature: <input style="width: 90%;" type="text"/>	Date: <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">D</td><td style="width: 20px; text-align: center;">D</td><td style="width: 20px; text-align: center;">M</td><td style="width: 20px; text-align: center;">M</td><td style="width: 20px; text-align: center;">Y</td><td style="width: 20px; text-align: center;">Y</td></tr></table>	D	D	M	M	Y	Y
D	D	M	M	Y	Y		

OFFICE USE ONLY

- Program Leave cannot be approved after the Census Date (31/3 or 31/8).

HONOURS SUPERVISOR: (✓ Tick one) Endorsed <input type="checkbox"/> Not Endorsed <input type="checkbox"/> Name (print): <input style="width: 90%;" type="text"/> Signature: <input style="width: 90%;" type="text"/> Date: <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">D</td><td style="width: 20px; text-align: center;">D</td><td style="width: 20px; text-align: center;">M</td><td style="width: 20px; text-align: center;">M</td><td style="width: 20px; text-align: center;">Y</td><td style="width: 20px; text-align: center;">Y</td></tr></table>	D	D	M	M	Y	Y	Comments:
D	D	M	M	Y	Y		
HONOURS CONVENOR: (✓ Tick one) Approved <input type="checkbox"/> Not Approved <input type="checkbox"/> Name (print) : <input style="width: 90%;" type="text"/> Signature: <input style="width: 90%;" type="text"/> Date: <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">D</td><td style="width: 20px; text-align: center;">D</td><td style="width: 20px; text-align: center;">M</td><td style="width: 20px; text-align: center;">M</td><td style="width: 20px; text-align: center;">Y</td><td style="width: 20px; text-align: center;">Y</td></tr></table>	D	D	M	M	Y	Y	Comments:
D	D	M	M	Y	Y		
COLLEGE OFFICE: Signature: <input style="width: 90%;" type="text"/> Date: <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">D</td><td style="width: 20px; text-align: center;">D</td><td style="width: 20px; text-align: center;">M</td><td style="width: 20px; text-align: center;">M</td><td style="width: 20px; text-align: center;">Y</td><td style="width: 20px; text-align: center;">Y</td></tr></table>	D	D	M	M	Y	Y	Comments:
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