

REQUEST FOR

LEAVE OF ABSENCE

This form should be used if you are intending to be absent from class for 5 or more consecutive days, if you expect to miss the start of any study period, or if you are an Overseas student under 18 years of age and you will be travelling overseas during regular study breaks. Please submit the completed form to Student Services for processing.

If you need to be absent for an extended period and are unable to maintain your program progression, you may need to defer your studies. In this instance please complete the Intermission/Deferral of Studies form.

Instructions:

1. Complete the first section below with your leave details and attach any supporting documentation.
2. Speak with all of your Lecturers to ensure you are able to maintain your program progression during an approved absence. If you are an Overseas student travelling overseas during regular study breaks and you do not plan on missing any classes you may skip this section.
3. You should consider applying for Special Consideration by completing the Application for Special Consideration if an assessment is due in the period you will be absent. Special Consideration will be assessed in accordance with the Special Consideration guidelines in the Assessment Policy. Applications for Special Consideration must be received before the assessment event or within 72 hours of the assessment event. Any Applications for Special Consideration received outside of this timeframe will be declined.

USE BLOCK LETTERS WHEN COMPLETING THIS FORM AND PLEASE KEEP A COPY.

Personal details

Title <input type="checkbox"/> Mr <input type="checkbox"/> Ms <input type="checkbox"/> Other (please specify):	
Family name	
First name(s)	<input type="checkbox"/> Male <input type="checkbox"/> Female
Date of birth (d/m/y)	Student ID
Telephone (home/mobile)	
E-mail	
Full address	
City	Postcode
State	Country

Reason for leave

Leave details

I wish to intermit my studies from date (d/m/y):	To:
During Trimester: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 of the year:	
Reason for leave of absence (please tick): <input type="checkbox"/> Medical <input type="checkbox"/> Overseas <input type="checkbox"/> Other (please state):	
I have attached the relevant document(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	
Signature	Date

Enrolment details

I am enrolled in the following (please tick):

Current campus (please tick): <input type="checkbox"/> Adelaide <input type="checkbox"/> Brisbane <input type="checkbox"/> Melbourne <input type="checkbox"/> Sydney <input type="checkbox"/> Online	
Undergraduate programs <input type="checkbox"/> Diploma of Business <input type="checkbox"/> Bachelor of Business <input type="checkbox"/> Bachelor of Business (Accounting) <input type="checkbox"/> Bachelor of Business (Hospitality and Tourism Management) <input type="checkbox"/> Bachelor of Business (Marketing)	Postgraduate programs <input type="checkbox"/> Graduate Certificate in Business Administration <input type="checkbox"/> Graduate Diploma of Business Administration <input type="checkbox"/> Master of Business Administration <input type="checkbox"/> Graduate Certificate in Accounting <input type="checkbox"/> Master of Professional Accounting <input type="checkbox"/> Master of Accounting
Date studies commenced (d/m/y)	

Privacy: We recommend that you read Kaplan's Privacy Policy published on our website www.kbs.edu.au/privacy

Return this form to your Kaplan Business School campus admissions office:

Adelaide

Level 1, 68 Grenfell Street
Adelaide SA 5000

Tel: +61 (0)8 8215 4100

Email: kbsadl.studentservices@kbs.edu.au

Brisbane

Level 3, 252 St Pauls Terrace
Spring Hill, Brisbane QLD 4000

Tel: +61 (0)7 3872 3800

Email: kbsbri.studentservices@kbs.edu.au

Melbourne

Level 4, 370 Docklands Drive
Docklands, Melbourne VIC 3008

Tel: +61 (0)3 9626 4576

Email: kbsmel.studentservices@kbs.edu.au

Sydney

Level 8, 540 George Street
Sydney NSW 2000

Tel: +61 (0)2 8248 6758

Email: kbsyd.studentservices@kbs.edu.au

Office use only

Student advised (d/m/y)	Advised by	Data updated in EduPoint (d/m/y)
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To be completed by the Director/Academic Dean

<input type="checkbox"/> Approved	<input type="checkbox"/> NOT Approved	Authorised by (please print)	
Program note (if any)		Signature	Date