

NGEE ANN-ADELAIDE EDUCATION CENTRE
STUDENT LEAVE OF ABSENCE POLICY

This policy applies to provision for leave for all undergraduate and postgraduate coursework students enrolled at the NAAEC.

POLICY PRINCIPLES

1. Students may apply for leave of absence from their University of Adelaide's program for specified periods under certain circumstances.
2. All students must apply to NAAEC Registrar for leave of absence from their program by submitting the 'Leave of Absence' Form via the Program Executive.
3. All students who have approved leave of absence and wish to extend their leave of absence must apply for extension.
4. All students with approved Leave of Absence must notify the Program Executive via email of the intended Term to resume the program.
5. Students who are scholarship recipients and who wish take leave of absence from their program will need to seek approval from the Registrar to defer their scholarship. Failure to do so could result in the loss of scholarship.

(I) Length of Time Permitted for Leave of Absence

Leave will usually be granted for a minimum of one term and usually no longer than one academic year (i.e. 4 consecutive terms).

(II) Extensions

Students requiring an extension of their leave entitlements must make application to the registrar via the Program Executive citing special circumstances where:

- They have medical condition (certified by a medical practitioner).
- There are exceptional compassionate circumstances (supported by relevant independent documentation).
- They have been posted for overseas work assignments (supported by relevant documentation endorsed by the employer).

(III) Formal Approval

Formal approval will be on the basis of a Registrar endorsed Leave of Absence Form.

(IV) Withdrawal from course

Students who are awarded leave of absence are responsible for formally withdrawing from their courses by dropping from the classes in Access Adelaide for the time they will be absent from NAAEC. Student may enroll into the course(s) in the term which they plan to return.

Application for Leave of Absence

Student Name: _____ Student ID No.: _____

Email: _____ HP/Res: _____

Program: _____

Period of Leave of Absence from Program (in months): _____

Start date: _____ End date: _____

Reason: _____

I will be resuming study on (Return Term): _____

Student's Signature: _____ Date: _____

School/Faculty Approval

Approved: Not Approved:

Registrar: _____ Company Stamp: _____

Received by Program Executive: _____ Date: _____

Application for Extension of Leave of Absence

Original period of Leave of Absence from Program (in months): _____

Original start date: _____ Original end date: _____

Reason to requested extension: _____

I will be resuming study on (Return Term): _____

Student's Signature: _____ Date: _____

School/Faculty Approval

Approved: Not Approved:

Registrar: _____ Company Stamp: _____

Received by Program Executive: _____ Date: _____