



LEAVE OF ABSENCE 2010 – Domestic Students

THIS APPLICATION FORM IS USED TO APPLY FOR A LEAVE OF ABSENCE FROM A COURSE

1. Officially complete this application form by signing and dating it.
2. Present this application to your relevant Head of Centre to officially request a Leave of Absence from the course in which you are currently enrolled.
3. The Head of Centre will review this application and forward the outcome to the Registrar, who will notify you in writing.
4. Students enrolled in a Fee Maintenance, Foundation, Skills Creation, Apprentice/Trainee & Skills Building course/s who apply for a Leave of Absence within 4 weeks after the official commencement of their course may be eligible for a refund of fees (Government Funded Courses only).
5. Student enrolled in Skills Deepening course/s who apply for a Leave of Absence will only be eligible for a refund or cancellation of their VET FEE-HELP debt on or before their individual unit census date.

CENTRELINK

Please Note: If you are in receipt of a government benefit from Centrelink, you must notify Centrelink immediately to advise of your Leave of Absence.

YOUR PRIVACY

Your personal information will be collected and used for the purposes set out in the Box Hill Institute Privacy Collection Statement – available to be viewed on the Institute's web site at: www.bhtafe.edu.au/privacy

STUDENT TO COMPLETE:													
STUDENT ID NO. (If known)													
FULL NAME:													
DATE OF BIRTH:		/	/	SEX: (Please tick)		MALE <input type="checkbox"/>		FEMALE <input type="checkbox"/>					
ADDRESS:													
SUBURB:								POSTCODE:					
TELEPHONE:		HOME:				WORK:							
MOBILE:						FAX:							
REFUNDS: (If applicable)		Refunds will be sent by cheque. Alternatively you may complete bank details below for direct deposit.											
DIRECT DEPOSIT TO BANK ACCOUNT		BSB Number		Account Number				Account Name					
OR		Please complete this box if you require the refund to be issued to a person / company other than yourself.											
NAME / COMPANY NAME:													
ADDRESS:								POSTCODE:					
COURSE NAME:													
COURSE ID:													
REASON FOR LEAVE OF ABSENCE: (Attach additional information if necessary and keep a copy of all documents for your records).													
SIGNATURE:						DATE: / /							

All enrolled units not listed below will be marked WB
 If no units are listed, every enrolled unit will be marked WB

1 = Semester 1
 2 = Semester 2
 3 = Full Year

WB = did not attend 1 class or submit any work/participate in this unit
 WA = did attend at least 1 class or submitted at least 1 piece of work/participate in this unit
 (MUST INDICATE HOURS ATTENDED/PARTICIPATED UP TO WITHDRAWN DATE BELOW)

UNIT ID	UNIT NAME	SEM	WA/WB	IF WA HOURS ATTENDED/PARTICIPATED UP TO WITHDRAWAL DATE	IF WA DATE OF LAST ATTENDANCE/PARTICIPATION	MATERIAL FEE OR FFS FEE TO BE REFUNDED
1.					___/___/2010	\$
2.					___/___/2010	\$
3.					___/___/2010	\$
4.					___/___/2010	\$
5.					___/___/2010	\$
6.					___/___/2010	\$
7.					___/___/2010	\$
8.					___/___/2010	\$
9.					___/___/2010	\$

HEAD OF CENTRE / HOC DELEGATE CLEARANCE:

(Please note that a Leave of Absence will only be granted for a maximum of 2 semesters)

LEAVE OF ABSENCE GRANTED: YES: NO: (Please tick)

Reason for decision:

Period of leave is applicable: FROM: TO:

The above course officially started classes on: (Form cannot be processed without this date)

Course Teaching Materials fees are to be returned: NO YES If YES, amount: \$

Retained Course Item Fees are to be returned: NO YES If YES, amount: \$ (GST Inclusive)

Fee-For-Service Course Fees are to be returned: NO YES If YES, amount: \$

Other: (Please state) _____ Amount: \$

HOC SIGNATURE **DATE:**

SMART ENTRY OFFICER (Staff entering this Leave of Absence in SMART must check student's refund entitlement)

REFUND ENTITLEMENT?

No

- Minimum tuition fee paid initially
- Outside 4 wk deadline/census date
- Hours still above maximum threshold
- Other _____

Yes
(If Yes, complete details on right, and then forward to the Student Administration Refunds Officer) →

Tuition	<input type="text"/>	Fee For Service Fee (GST Exempt) (FGN)	<input type="text"/>
Amenity	<input type="text"/>	Postage Fee (POS)	<input type="text"/>
Course Teaching Materials (CTM)	<input type="text"/>	G.S.T.	<input type="text"/>
Retained Course Items (RCI)	<input type="text"/>	Other	<input type="text"/>

STAFF: ENTERED IN SMART

SIGN:

DATE:/...../.....

REFUNDS OFFICER: (If applicable)							
TOTAL REFUND:	\$	RR / SR NUMBER:	<input type="text"/>	PROCESSED BY:	<input type="text"/>	DATE:	/ /
TRANSFERRED VIA ET:	\$	ET NUMBER:	<input type="text"/>	PROCESSED BY:	<input type="text"/>	DATE:	/ /
VET FEE-HELP LOAN CANCELLED	NO <input type="checkbox"/>	YES <input type="checkbox"/>	PROCESSED BY:	<input type="text"/>	AMOUNT	\$	<input type="text"/>