

LEAVE OF ABSENCE APPLICATION FORM



Use this form to request a Leave of Absence (LOA) from your Higher Degree by Research program. A leave of absence can either cover an entire semester (i.e. 1 January to 30 June for semester 1; 1 July to 31 December for Semester 2) or a customised date range of no less than four weeks can be requested. This form and any supporting documentation should be submitted to Graduate Research as soon as practicably possible.

Please note that all candidates are entitled to 20 working days of annual leave (10 working days for PT candidates). You do not need to complete a form to take annual leave but you must discuss each instance with your supervisor. Scholarship recipients may also apply for up to 10 days paid sick leave a year, calculated on a pro-rata basis. This is approved by your supervisor. Additional sick leave is dependent on your scholarship conditions and will require the presentation of a medical certificate.

Holders of a student visa may only apply for LOA based on compassionate or compelling grounds and evidence should be provided where applicable (e.g., medical certificate). Approved leave will be reported to both the Department of Education and Department of Home Affairs. Candidates are expected to return to their home country for the duration of the approved leave. Sponsored students are required to provide evidence of leave approval from their sponsor.

CANDIDATE DETAILS

Family Name:

Given Name:

Student Number:

LEAVE REQUESTED

Semester LOA

Semester:

Year:

OR Customised Date Range LOA

First Day of Leave:

Last Day of Leave:

Reason(s) for
requesting LOA:

Have you provided necessary
documentation supporting this request?

Yes:

☐

No:

☐

International Students

Date of departure from Australia:

SIGNATURE AND APPROVALS

An international student who signs this form confirms that they will reside at their **home address**, as stated in [myHub](#), should the period of leave be approved.

Candidate Signature:

Date:

Please sign this form using your Adobe Digital Signature. Click on the box above and follow the prompts. Email the completed form to your Principal Supervisor. Once signed off, they will return to you, for you to forward to Graduate Research: graduate-research@newcastle.edu.au. **Please copy in all of your supervisors when you submit the form to UON GR.**

Supervisor Name:

Do you support this LOA request?

Yes:

☐

No:

☐

Provide justification for this decision:

Signature:

Date:

Please return the completed form to the candidate, who will forward to Graduate Research: graduate-research@newcastle.edu.au. GR will coordinate all necessary subsequent approvals.

**Head of School
Nominee Name:**

Do you support this LOA request?

Yes:

☐

No:

☐

Provide justification for this decision:

Signature:

Date: