



Application For Leave To Study Overseas/Away

This form is for completion by Masters (Research) candidates requesting permission to study overseas or away from the University during their candidature and/or from their scholarship/award. To be lodged by the candidate at Arts & Music Student Centre (Room 104, Old Arts Building) after completion of **all sections**. Any alterations to leave dates must be reported by completing an additional form. Students should ensure they have adequate travel insurance.

TITLE	<input type="text"/>		
FAMILY NAME	<input type="text"/>	STUDENT NO.	<input type="text"/>
GIVEN NAME(S)	<input type="text"/>	DEGREE	<input type="text"/>
SCHOOL	<input type="text"/>	SCHOLARSHIP	<input type="text"/>
ADDRESS	<input type="text"/>		
	<input type="text"/>		
POST CODE	<input type="text"/>	CONTACT PHONE NO	<input type="text"/>

PREFERRED EMAIL ADDRESS:

CONTACT ADDRESS FOR CORRESPONDENCE IF DIFFERENT FROM ABOVE:

Note: Re-enrolment papers will be sent to this address.

<input type="text"/>
<input type="text"/>

I wish to apply for permission to study abroad/away from the University:

Whilst holding a scholarship/award Whilst not holding a scholarship/award

For the period of to

I have the necessary funds to cover travel expenses and incidental costs. I wish to study abroad/away for the following reasons and at the following location:

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

SIGNATURE DATE

Leave may be granted to candidates to study away from the University in order to make use of essential research facilities or material not available in Melbourne. Candidates remain enrolled and no change is made to their completion dates. Candidates who will be away during the re-enrolment period should make appropriate arrangement for re-enrolment before they leave.

Please note that leave to study overseas or away from the University is available for APA or MRS scholarship holders for up to 12 months in aggregate.

All Masters candidates holding an APA, MRS or Studentship who wish to study away should also use this form.

FOR COMPLETION BY THE SUPERVISOR AND HEAD OF SCHOOL

We approve the above request and confirm that appropriate arrangements have been made for the candidate's work to be supervised.

We certify that the work is a necessary and integral part of the candidate's research program, that the student is required to continue enrolment at the University, and the work is to be credited towards his/her higher degree candidature.

Leave is for: 3 months or less;

more than 3 months (or consecutive periods totalling more than 3 months)

If leave is for more than 3 months, an associate supervisor has been appointed and has agreed to act.

NAME OF NOMINATED EXTERNAL SUPERVISOR:

INSTITUTION:

SUPERVISOR'S COMMENTS:

NAME: **SIGNATURE:** **DATE:**

HEAD OF SCHOOL'S COMMENTS:

NAME: **SIGNATURE:** **DATE:**

FACULTY COMMITTEE'S SIGNATURE

DATE:

OFFICE USE ONLY

SCHOLARSHIPS APPROVAL:

DATE:

FACULTY APPROVAL:

DATE:

MERLIN UPDATED:

DATE: