

Deferment and Leave of Absence Application

Educate. Learn. Empower. Lead

In support of a Deferment or Leave of Absence Application, you must provide detailed evidence.

An application may be denied if the requested evidence is not provided.

Personal Details										
Student ID										
Surname										
Given Names										
Telephone	Date of Birth									
Address										
State / Territory	Postcode									
Email address										
Course Title & Code	Diplo	oma of Financial Counselling	CHC51	115						
Leave Request										
Is this a new application?							Yes		No	
Is this an extension to an existing deferment / leave of absence?							Yes		No	
If yes, please indicate the existing period of leave:							То			
When would you like t	the De	ferment / Leave of Absence	to con	mence?		Date				
I intend to recommence studies on: Date										
Please select your Rea (You are required to provid certificate)	Me	Medical Personal		sonal	Work		Other			
I am providing		Detailed medical report	En	Employer letter			Othe	Other		
If you selected Other, you are required to provide further information by typing in the box below:										
Declaration										
I understand that it is with regard to any ext the training course.	my res	ed I will be withdrawn from a sponsibility to investigate the bodies e.g. effect on Centrel ally provided you use an Ad	e conse ink ber	equence ti nefits worl	hat ta k oblig	king a Le gations/r	eave of Al	osence ents fo	e might h or under	nave taking
signature is required.										
Student signature:	Date:									
Email your complete	d and	hand-signed form to admi	nistra	ion@icar	nlearr	n.edu.au	<u>_</u>			

You can contact the ICAN Learn office via administration@icanlearn.edu.au if you have any questions.



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ICAN Learn Application Assessment									
The student meets the following criteria:									
i.	the effect of this and any previous absences of the student; and								
ii.	the evidence the student has provided; and								
iii.	the student's capacity to complete the course within the allocated maximum time for completion; and								
iv.	the student's engagement in contributing to the formulation of a return to study plan; and								
V.	v. the ability of ICAN Learn to provide learning at another time e.g. course availability.								
Dates of Deferment / leave of absence granted		Start			End				
Current Enrolment Dates		Start			End				
Amended Enrolment Dates		Start			End				
Date Approved				Date Not approved					
Comments									
Name of person approving application									
Signature of person approving application		n							