

Signature: _____ Date: _____

SECTION C: (to be completed by candidates applying for permission to complete away ONLY. Attach an additional statement if necessary.)

Work already completed (at time of application): _____

Detailed timetable for completion: _____

Reason for Request: _____

Date of departure from Sydney: _____

Signature: _____ Date: _____

SECTION D: (to be completed by Supervisor – Research students only)

Comments on the candidate's request and where appropriate, on the information supplied. If the candidate is requesting permission to count time away or to complete away, specify the arrangements being made to ensure adequate supervision during the relevant period.

The request is Supported Not Supported (tick as appropriate)

Comments: _____

Signature: _____ Date: _____

SECTION E: (to be completed by Head of Department/School/Centre or delegate for Research students; or by Postgraduate co-ordinator for Coursework students)

The request is Supported Not Supported (tick as appropriate)

Comments: _____

Signature: _____ Date: _____

PLEASE FORWARD TO THE POSTGRADUATE SECTION, FACULTY OF SCIENCE, CARSLAW BUILDING, F07

SECTION F: (to be completed by Faculty Office)

Total period of *previous* Suspensions: _____

New completion dates: Earliest date _____ Latest date _____

Suspension/Leave of Absence (delete as appropriate) Approved: _____

Permission to Count Time Away from _____ to _____

Permission to Complete Away granted from _____

Associate Dean's/Dean's Signature : _____ Date: _____

Postgraduate Studies Committee (where applicable): _____