

DOCTOR OF MEDICINE LONG LEAVE OF ABSENCE FORM



MELBOURNE
MEDICAL
SCHOOL

Any Year 1 student considering leave is asked to discuss it with the MD Students and Programs Coordinator in the Department of Medical Education.

Any student in Years 2, 3 or 4 requiring a one year leave of absence must discuss it with their Clinical Dean/Director of Medical Student Education (DMSE) and obtain endorsement from them.

Students requesting a leave of absence from Years 2, 3 or 4 (i.e. clinical years) of the course are required to apply at least two months before the beginning of the year in which the absence occurs.

Students must refer to the Leave of Absence Policy and Procedures prior to completing and submitting this form. This policy is available at <http://medicine.unimelb.edu.au/students/policies>.

STUDENT

Student name: _____ Student number: _____

Address: _____

University email: _____@student.unimelb.edu.au Phone: _____

Academic year leave requested: 20 ____ Current MD year level: (please tick) 1 2 3 4

Clinical School: (please tick if applicable)

Austin Northern RMH Western SVH RCS Epworth

Reason for application (please attach supporting documentation):

Student signature: _____ Date: _____

APPROVER

Endorsed by Clinical Dean/DMSE (only required for Years 2 - 4):

Name (please print): _____

Signature: _____ Date: _____

Please submit your completed form, either by email to md-enquiries@unimelb.edu.au or in person, into the submission box at the Department of Medical Education, Level 7, North Wing, Medical Building. The MD Students and Programs Coordinator will seek final approval from the Head of the Department of Medical Education and send you written confirmation of the outcome of your application.

OFFICE USE ONLY: Approved / Not Approved (please circle) by the Head of the Department of Medical Education:

Signature: _____ Date: _____