

How to I apply for a leave of absence?

Students applying for an extended leave of absence will need to complete the attached form and return it to Sechi Hair Academy prior to the commencement of your leave of absence.

All tuition fees due must be settled prior to commencement of an extended leave of absence.

How will I know my application for leave of absence has been approved?

Sechi Hair Academy will notify you in writing within fourteen (14) days of receipt of your application if your leave of absence has been approved.

What do I need to know if my application is approved?

- The date of completion of your enrolment may be altered from your original completion date.
- Your course progress may be affected.
- Your training schedule may change.
- You are responsible for making sure your contact details are kept current during your absence.
- You must return to classes when expected, that is, immediately after the period of absence ends. If you do not, you will risk being withdrawn from your course.
- Upon approval of your application, a reconnection appointment will be scheduled for you to attend prior to your return from absence. It is crucial that you attend this appointment so that any changes to your training schedule can be clearly explained.

What do I need to know if my application is not approved?

If your application for a leave of absence is not approved, you will be required to continue attending classes as per your training schedule. If you fail to attend classes, you will be marked absent. Repeated absences without notification to Sechi Hair Academy may lead to withdrawal from your course.

Do I need to attach evidence to this application?

Yes. In order for your leave of absence to be approved, you will need to supply Sechi Hair Academy with the appropriate documentation supporting your request.

What evidence do I need to provide with my application?

If you are applying for an approved leave of absence on medical grounds (you or a close family member is ill) you must provide a valid medical certificate (NOT a copy of a prescription or X-ray, etc.). Valid medical certificates must have the following information and characteristics:

- Name and address of the medical practitioner issuing the certificate
- Name of the patient
- If you are caring for a patient, your name must be listed as the carer
- Date on which the certificate was issued
- Date/s on which the patient/carers is or was unfit for study
- The certificate should be written so that a non-medical person can read it
- The certificate should be written on stationary designed specifically for this purpose
- The certificate should demonstrate that evidence of the condition did exist at the time of absence, as distinct from a claim by the patient/carers.

Application for Leave of Absence

Other documentation which can be provided to Sechi Hair Academy includes:

- Counsellor, Psychologist or Psychiatrist's report
- Return flight tickets – date of airline ticket should closely match the period of suspension that you are applying for
- Letter or other form of documentation filled out on a Commonwealth of Australia Statutory Declaration Form that has been certified by a relevant party.

If the documentation you are submitting is written in a language other than English, you must provide Sechi Hair Academy with a certified English translation of the document.

How long can a leave of absence be?

In most cases, an approved leave of absence is granted for periods greater than one (1) week. Applications for a leave of absence greater than three (3) months will in most cases not be approved unless exceptional circumstances can be established.

Further Information

If you require any further information regarding this Application for Leave of Absence form, please don't hesitate to contact the Sechi Hair Academy head office on (03) 8754 0000.

Student Details

Family Name:		First Name:	
Date of Birth:		Student ID: <i>(if known)</i>	
Mobile:		Home Phone:	
Email Address:			

Student to Complete

Please tick the qualification/s from which you wish to take an extended leave of absence.	<input type="checkbox"/> SHB20116 Certificate II in Retail Cosmetics <input type="checkbox"/> SHB20216 Certificate II in Salon Assistant <input type="checkbox"/> SHB30416 Certificate III in Hairdressing <input type="checkbox"/> SHB40115 Certificate IV in Beauty Therapy	
Have you previously been granted a leave of absence from any of the above qualifications?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
My reason for applying to take a leave of absence is: <i>(tick one box only)</i>	<input type="checkbox"/> Academic Difficulties <input type="checkbox"/> Travelling/Holiday <input type="checkbox"/> Family Reasons	<input type="checkbox"/> Financial Hardship <input type="checkbox"/> Medical <input type="checkbox"/> Other <i>(please specify below)</i>
Please provide more details about why you are applying for a leave of absence, and list any documentation that is to be provided. <i>Documentation must be attached to this application for approval.</i>		
Please list the to and from dates for which you would like to take a leave of absence.	From: / / 20	To: / / 20

Student Declaration

By signing below, I understand that an approved leave of absence could affect my course progress and duration of enrolment. I also confirm that the information that I have provided on this form is complete and correct.

Student Name:	
Signature:	
Date:	

Students under the age of 18 are required to have their parent/guardian sign below.

Student Name:	
Signature:	
Date:	

Office Use Only

Has sufficient evidence been provided to support this leave of absence?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Please list what evidence has been provided by the student. <i>Evidence is to be attached to this form.</i>	
Has this application been approved?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of recommencement:	/ / 20
Has the student been informed of their recommencement date?	<input type="checkbox"/> Yes <input type="checkbox"/> No Informed on / / 20
Has the trainer been informed of the student's leave of absence dates?	<input type="checkbox"/> Yes <input type="checkbox"/> No Informed on / / 20
Has the leave of absence been recorded in aXcelerate?	<input type="checkbox"/> Yes <input type="checkbox"/> No Recorded on / / 20
Have Ezy pay payments been suspended for the duration of the leave of absence?	<input type="checkbox"/> Yes <input type="checkbox"/> No Recorded on / / 20
Any additional comments:	

Staff Name:	
Staff Signature:	
Date:	