

Application for Interruption to Studies

1. Student Details					
Name					
Student Number (8 digits)					
Mobile number					
2. Program Details					
Name of Program					
Year in Program (1 st year, 2 nd , 3 rd ...)					
3. Details of Interruption					
Planned recommencement	Semester			Year	
Have you previously interrupted your studies?	No				
	Yes, from Semester			Year	
4. Reasons for Application					
Medical Condition			Medical documentation attached		
Exceptional Circumstances			Supporting documentation attached		
5. Declarations					
Please outline your reasons for requesting to interrupt your studies.					
I am aware that, if approved	I am responsible for dropping/cancelling all courses and abiding by the University's rules in relation to fees and charges associated with my enrolment;				
	I am responsible for contacting the School before 30 May (if returning to study Semester 2) or 31 December (if returning to study Semester 1) to confirm my return to study;				
	Conditions may be set.				

OFFICE USE ONLY						
Recommended	Yes	No	Program Lead		Date	
Approved	Yes	No	Head of School		Date	
Comments						
Year Student commenced program			Year		Semester	
Student to recommenced program			Year		Semester	
Updated in SI-net (comment entry)				Placements advised		
Pre-commencement officer advised				Sent to e-file		
Processed by:	Name				Date	

Form to be submitted to the School via email, post or in person.

Email	Mail address	School location
nmsw@uq.edu.au	School of Nursing, Midwifery and Social Work The University of Queensland St Lucia QLD 4072	School of Nursing, Midwifery and Social Work Level 3, Chamberlain Building (#35) The University of Queensland St Lucia campus Monday to Friday, 9am-5pm