

① Before completing this form please consult <https://i.unisa.edu.au/students/research-students/student-forms/>

PART 1: PERSONAL DETAILS

Student ID	
First Name	
Family Name	

PART 2: REASONS TO STUDY AWAY FROM THE UNIVERSITY

I wish to study away from the University:	From:	To:
Please provide the reason for the study away (attach another sheet if necessary)		
I have previously studied away from the University?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I will be taking recreation leave whilst studying away from the University	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, please provide dates:	From:	To:
Note: You must obtain approval from your supervisor to take recreational leave for this period. Any other leave will require you to complete an application for leave of absence https://i.unisa.edu.au/students/research-students/student-forms/		

PART3: CHECKLIST & STUDENT DECLARATION

In signing this form I:			
<input type="checkbox"/>	Confirm I have read and understood the information on https://i.unisa.edu.au/students/research-students/student-forms/		
<input type="checkbox"/>	Have attached any supporting documentation (<i>if applicable</i>)		
<input type="checkbox"/>	Have obtained <i>and</i> attached approval from the institution I am visiting.		
<input type="checkbox"/>	Understand that study away from the University cannot be used as a reason for an extension to candidature or scholarship.		
<input type="checkbox"/>	Will follow the University's travel policy when making the necessary arrangements should the application be approved. (<i>if travel extends beyond 6 months, please contact insurance@unisa.edu.au.</i>)		
<input type="checkbox"/>	Give my consent for UniSA to share information with the organisation I am visiting.		
Student signature		Date	

PART 4: CURRENT ACADEMIC UNIT APPROVAL

Comments in support of the application:

In signing this form, I confirm the following;

- The study away is directly related to the student's research
- Supervision arrangements have been put in place whilst the student is studying away from the University and supervision is provided at the hosting institution
- Insurance implications have been investigated through the University's insurance team and written advice sought about risks to the student and the University.

Supervisor name:

Supervisor signature:

Date

Research Degree Coordinator name:

Research Degree Coordinator signature:

Date

Staff Use: Please check and submit the completed form to **Graduate Research - SAS** via email research.students@unisa.edu.au