

LDP Withdrawal or Deferral

Participant name: _____ Mentor name: _____

School: _____ Suburb: _____

LDP participants are able to request withdrawal or defer from their studies. LDP participants who intend to withdraw from their studies are reminded of the agreement they signed at the commencement of LDP. Specifically:

I am prepared to:

- *undertake the study in a professional manner and commit to complete the study program within the two-year timeframe unless there are exceptional circumstances for which agreement has been reached with the regional manager*
- *repay the scholarship monies in full for all units if I do not complete the Postgraduate Certificate in Educational Leadership*

Participants should discuss their reasons for withdrawal or deferral with their mentor and other relevant support people such as their principal or regional manager.

1. Deferral

Deferral of studies is possible under certain circumstances:

- Increased workload at current school
- New position resulting in increased workload in new school
- Personal illness
- Serious illness in close family
- Other unforeseen circumstances

Should a LDP participant wish to defer studies the following will apply:

- The participant will be expected to resume studies with the next LDP cohort
- The relevant regional director and LEA Director of Leadership are to be notified
- Withdrawal prior to census date for the relevant units will not incur any financial penalty

I wish to defer my studies (*please go to [section 3](#)*)

Date of anticipated return to study:

2. Withdrawal

Should a LDP participant wish to withdraw from studies the following will apply:

- The relevant regional director and LEA Director of Leadership are to be consulted
- Withdrawal prior to census date for the relevant units will not incur any financial penalty – withdrawal form must be forwarded to LEA prior to this date
- Subsidies paid prior to withdrawal must be re-paid to LEA
- Claims for subsidies for incomplete units will not be accepted

I wish to withdraw from my studies (*please complete [section 3](#)*)

3. Details of units

Please provide details of units you have completed and those for which you are requesting withdrawal or deferral.

| | Unit | Result | Date you ceased study | Subsidy received Y/N |
|----------|-------------|---------------|------------------------------|-----------------------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |

I have attached documentation of evidence to support this application (sick certificate, letter from current principal)

I am aware I will not receive further subsidies

Signature _____ Date:

Please forward this form, along with any supporting documentation to lea@lutheran.edu.au