

Break in Study Request Form - Collaborative

For students on a Collaborative course

Before completing this form, please read the following documents:

- [Break in Study Policy and Procedure](#)
- [Student Pregnancy and Maternity Policy](#) (where applicable)

After reading these documents and considering all the implications, if you still wish to take a Break in Study, please initially speak with your partner institution and then make an appointment with a Student Support Adviser via [Hallam Help](#).

Please note that this form can only to be completed in conjunction with a Student Support Adviser. Until this form is completed, signed by you both and submitted, you will still be deemed to be enrolled and attending your course and you will be charged fees accordingly.

Student Details:	
Student Name:	
Student Number:	
Course Title:	
Level of Study:	
Contact Details:	Email: Phone: Mobile:
Is the student present to complete this form with you:	Yes/No* (*delete as appropriate)

Reason for Break in Study (if more than one reason please specify primary reason):	
Medical/personal reasons (anticipated to be more than 4 weeks and not within the final 4 weeks of teaching):	
Reasons due to Exceptional Circumstances:	Please tick:
Bereavement	
Caring responsibilities	
Domestic circumstances	
Impact of crime/harassment	
Mental health (Certified) – medical evidence provided	
Mental health (Uncertified) – NO medical evidence provided	

Natural disaster/war	
Physical health (Certified) – medical evidence provided	
Physical health (Uncertified) – NO medical evidence provided	
Other Reasons:	Please tick:
Financial reasons	
I have been offered employment for a year	
High performance sporting event	
I am an international student and need to renew my visa	
Maternity Leave See Student Pregnancy and Maternity Policy for additional responsibilities, particularly regarding the completion of a Pregnant Student Risk Assessment by the Academic Advisor, point 8 of the Policy	
I have not secured a placement on a sandwich course	
Paternity Leave	
Professional, Statutory and Regulatory Bodies (PSRB) requirements	
I am transferring course next year	
I have a University support plan	
Work commitments	
Other reason not listed* (please specify reason in the box below) *Only use 'Other reason not listed' where no other reason is appropriate and specify the reason(s) in the box	

You must provide further information as to why you are requesting a Break in Study:

--

If you wish to void marks from any module(s) you have not passed, please provide further details:

--

Please explain what support or interventions you have had so far prior to requesting a Break in Study:

Contact during your Break in Study:

If you are taking a Break in Study for Exceptional Circumstances, do you give the University permission to contact your Next of Kin to discuss details of resuming your studies?

Yes/No* (*delete as appropriate)

If yes, please provide contact details:

Name:

Email:

Phone:

Mobile:

Timing of Break in Study:

Date of break – for processing in SITS:

Please note: the start of the Break in Study is the date agreed between the student and the University, or the date form is received by the Student Support Adviser, whichever is earlier

Date of intended return:

Please note: the Return to Study date should be the Monday of the next course or module intake which the student plans to re-join

Please note that you are expected to return to your studies on the date above. A Student Support Adviser will contact you approximately 4 months prior to your expected date of return.

If you do not enrol on your expected date of return, it will be assumed that you do not wish to continue your studies with the University and you will be permanently withdrawn from your course.

A Break in Study counts toward the maximum duration of your course – see the [Standard Assessment Regulations](#) for further details. You commenced your study in the 20xx/xx [to be completed] academic year and are now expected to complete your course by the 20xx/xx [to be completed] academic year (normal duration of the course plus Break in Study time).

Student Declaration:

I can confirm that I have read the [Break in Study Policy and Procedure](#) and, where applicable, the [Student Pregnancy and Maternity Policy](#).

I understand:

- All of the considerations and implications, outlined in the guidance document, of taking a Break in Study.

- That it is my responsibility to manage the impact that this break will have on my future funding and financial support to study.
- That the break counts towards the length of time that I am taking to study my course and that maximum duration regulations apply.

For international students only:

- I confirm that I understand the visa implications of taking a Break in Study, that my break will be reported to UKVI and that I must obtain a new visa to resume my studies.

Student signature:

Date:

Approved by Student Support Adviser:

Date:

Arrangements for resuming your studies:

Am I allowed to take any outstanding assessments during my break?

Please note this is only approved for non-Exceptional Circumstances reasons.

Yes/No* (*delete as appropriate)

Details of assessments:

Please include full title of modules and codes - do not use abbreviations

Modules taken during this academic year:	Current Status of module:	Status on return:	Core or Elective:	Notes:

Do you have any requests to support resuming your studies?

We will do our best to accommodate reasonable requests, in line with our other policies, but cannot guarantee that all requests will be granted.

OFFICE USE ONLY – Additional Notes




Is this student supported by the Capacity to Study Process?	Yes/No* (*delete as appropriate)
Will this student require an appointment when they Return to Study?	Yes/No* (*delete as appropriate)
Is an Occupational Health referral needed when they Return to Study?	Yes/No* (*delete as appropriate)
Is this student NHS Trust Funded?	Yes/No* (*delete as appropriate)
Will this student require further support when they return to study?	Yes/No* (*delete as appropriate)
Details of further support required	
Should this student receive extra funding due to the evidence provided?	Yes/No* (*delete as appropriate)

OFFICE USE ONLY – Decision

Break in Study approved?	Yes/No/Pending* (*delete as appropriate)
Decline reason:	<input type="checkbox"/> The circumstances reported do not meet our definition of Exceptional Circumstances
	<input type="checkbox"/> You have not provided any supporting evidence
	<input type="checkbox"/> A Break in Study would take you beyond the maximum duration for your course (see point 6 of the Break in Study Policy and Procedure)
	<input type="checkbox"/> Your course is about to close or be substantially redesigned, meaning that the current provision will not be available when you return
	<input type="checkbox"/> You are in debt to the University regarding tuition fees
	<input type="checkbox"/> You are making the request within the final four weeks of teaching in the academic year, or after teaching has finished

OFFICE USE ONLY – Outcomes

SRL email sent to relevant stakeholder(s)?	<input type="checkbox"/> Academic Adviser
	<input type="checkbox"/> Apprenticeships Team
	<input type="checkbox"/> Course Leader
	<input type="checkbox"/> Disabled Student Support Team
	<input type="checkbox"/> HWLS Health Funding Team
	<input type="checkbox"/> Placement Team
	<input type="checkbox"/> Professional Compliance Team

	 Student Records Service Team
	 Student Systems and Reporting (Finance) Team
	 UKVI Compliance Team

Document owner:	Registry Operations		
Date last reviewed:	24 th September 2024	Date of next review:	July 2025