Records Management

Special Request Form

PURPOSE OF APPLICATION
Please tick only one of the following and read the applicable notes.

☐ Interrupted training (reg 38.6.12)
☐ Extension of Interrupted Training beyond 104 continuous weeks (reg 38.6.12.7)
☐ Retention in BTY2E beyond 156 weeks (reg 38.6.6.5)
☐ Special consideration for extension of annual training fee due date (reg 38.6.2.3.3)

1. PERSONAL INFORMATION

ANZCA ID: __________________________

Family Name: ________________________  First Name: ________________________

Email address: _________________________

Mobile Phone: ________________________

2. DATES OF REQUEST
Please indicate the start and end dates (if applicable to your request).

Start Date: Day _______ Month _______ Year _______

End Date: Day _______ Month _______ Year _______

3. REASON FOR REQUEST
Please explain your reason for this request. If you require more space you may continue on another page.

________________________________________________________________________

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________________________________________________________________________

4. DECLARATION OF TRAINEE
I solemnly declare that the statements made in this application are true and accurate.

Signature: __________________________  Date: Day _______ Month _______ Year _______
## 5. ACKNOWLEDGEMENT BY SOT (FOR INTERRUPTED TRAINING ONLY)

This is to be signed by the last SOT prior to commencing interrupted training.

Do you support the request for interrupted training? **Yes / No**

Please provide a reason:

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**Signature:**

**Date:**

### Special Request Form (Notes)

| **Interrupted training**  
* (reg 38.6.12) | Any period of leave longer than permitted normal leave constitutes interrupted training (IntT). All IntT must be applied for prospectively. In circumstances such as unexpected illness where prospective application is not possible, application must be made at the earliest opportunity. Interrupted training is limited to 104 continuous weeks. For trainees wishing to undertake option B scholar role activities during IntT, please include name of your post-graduate program or the title of your project. |
|---|---|
| **Extension of Interrupted Training beyond 104 continuous weeks**  
* (reg 38.6.12.7) | If you are applying to extend Interrupted training (IntT) beyond 104 continuous weeks, please indicate the approximate end date of your request in section 2. In section 3, please indicate any special circumstances justifying the retention of your training status beyond this time-point. Attach full supporting documentation with your application. |
| **Retention in BTY2E beyond 156 weeks**  
* (reg 38.6.8.5) | If you are applying for retention in extended training beyond the allowed time, please indicate the approximate amount of time you will need in order to complete the requirements. Please indicate any special circumstances justifying the retention of your training status. Include full supporting documentation with your application. |
| **Special consideration for extension of annual training fee due date**  
* (reg 38.6.2.3.3) | If you are experiencing a financial hardship which makes payment within the required time frame impossible, you may prospectively apply to the DPA Assessor for special consideration. Please provide any details regarding your hardship and the amount of time you require to pay the required fee. Each case will be considered on an individual basis. |

### Instructions for Completing the Special Request Form (SRQ)

2. **Reason for request**
   This section should include a brief summary of why you are making this request.

3. **Dates of request**
   This section is required only for requests/notifications that have a start and an end date, e.g., Interrupted training.

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### 4. Declaration of trainee

The College requires that you sign and date the declaration that the information on the application is true and accurate.

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**Please Send the completed form to:**

ANZCA  
* c/o Records Management  
* PO Box 6095  
* ST KILDA ROAD CENTRAL  
* VIC 8008 AUSTRALIA  

assessor-requests@anzca.edu.au