# STUDY LEAVE (PAID) POLICY

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## Contacting the Victorian Chamber of Commerce and Industry

The Victorian Chamber’s team of experienced workplace relations advisors can assist members with a range of employment, human resources and industrial relations issues.

Our experienced workplace relations consultants can also provide assistance to both members and non-members on a range of more complex matters for a fee-for-service. The consultants can, among other things, provide training to employees, conduct investigations and provide representation at proceedings at the Fair Work Commission.

For assistance or more information, please contact the Workplace Relations Advice Line on (03) 8662 5222.

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# STUDY LEAVE (PAID) POLICY

Date of issue:

Policy approved by:

Contact person:

## 1 PURPOSE

The purpose of this policy is to outline the assistance and funding **[INSERT COMPANY NAME]** may offer to eligible employees to pursue further education in areas aligned with their position or related goals.

## 2 APPLICATION

**[INSERT COMPANY NAME]** will consider all applications to fund accredited training and tertiary study for eligible employees. Employees seeking to undertake further study must sign an acknowledgement form accepting the terms and conditions associated with accessing funds as outlined in this policy.

Any **[INSERT COMPANY NAME]**-funded further study must have a direct correlation to the employee’s immediate role, or their future career path within **[INSERT COMPANY NAME]**, as well as providing some short or long term benefit directly to the company.

**Criteria – Eligible Employees**

To be eligible to apply to access funds and assistance for further study, staff members must have completed 12 months service with **[INSERT COMPANY NAME]**.

## 3 POLICY

## Terms and Conditions of funding assistance

Approval of study leave is at **[INSERT COMPANY NAME]**’s sole discretion and approval in one situation will not constitute a precedent for another situation or general approval.

It is a requirement that any courses being undertaken in conjunction with the further study policy must be provided by recognised educational institutions which provide accredited courses culminating in a degree, diploma, certificate or similar qualification.

Whilst approval may be given to an employee to undertake an education program (i.e. certificate, diploma, degree), all study will be funded on a unit-by-unit basis and funding for subsequent units may be withdrawn at **[INSERT COMPANY NAME]**’s sole discretion.

Employees can apply to obtain funding for fees associated with each unit and for reasonable expenses, such as textbooks.

**[INSERT COMPANY NAME]** reserves the right to withdraw funding from any individual who demonstrates an incapacity or unwillingness to complete any unit or course in relation to which the funding has been previously authorised and released. **[INSERT COMPANY NAME]** also reserves the right to withdraw funding, should any employee be unwilling or unable to maintain a high level of performance in their employment whilst participating in **[INSERT COMPANY NAME]** funded study.

**[INSERT COMPANY NAME]** may choose to provide full or part-funding dependent on the relevance of the further study to an employee’s current position, or their potential career progression within the company, and the relative benefit of such study achieving the company objectives as a whole.

Each application will be considered on the following basis:

* the potential benefit of the study to both **[INSERT COMPANY NAME]** and the employee
* the work performance of the employee
* the total number of applicants for further study (and hence, the funding available)
* approved further study and training undertaken by the applicant in the past.

Staff undertaking tertiary studies are required to arrange their timetables so as to cause minimal disruption to their department. Where possible, lectures should be attended outside of normal working hours. Any arrangements to attend lectures or classes within the normal working day will only be approved with the endorsement of the relevant General Manager.

If an employee is unable to attend the workplace due to further study commitments, it is the individual’s responsibility to ensure they complete any work outstanding as a result of their absence or ensure appropriate leave is taken.

Any staff undertaking **[INSERT COMPANY NAME]** funded study may be required by their direct manager to provide a written or verbal report on the progress of the study, the material covered to date and the relevant application of this learning in an organisational setting.

Should a staff member choose to leave **[INSERT COMPANY NAME]** within 12 months ***[or insert company preference for time period]*** of completion of their **[INSERT COMPANY NAME]**-funded education program, **[INSERT COMPANY NAME]** has the right to request a pro-rata reimbursement of the outlaid funds as per below:

* Up to six months following reimbursement of funds – 100 per cent reimbursement to **[INSERT COMPANY NAME]**.
* Up to 12 months following reimbursement of funds – 50 per cent reimbursement to **[INSERT COMPANY NAME]**.

**[Or insert company preference for reimbursement of funds]**

There will be an annual limit of **[insert amount]** per employee to be provided by **[INSERT COMPANY NAME]**. This amount will only be exceeded in exceptional cases, at the approval of the CEO.

The employee will be required to pay all costs relating to their formal course upfront (as well as reasonable expenses relating to the course, for example text books) and **[INSERT COMPANY NAME]** will reimburse the approved expenses provided the employee:

1. is still employed by **[INSERT COMPANY NAME]**;
2. has obtained at least a pass and provides written results from their education institution as evidence.

**Insert only if desired -** In exceptional circumstances and at its sole discretion, [INSERT COMPANY NAME] may pay for approved further study in advance. In such a case the employee would agree that they would repay the amount outlaid by [INSERT COMPANY NAME] in full to [INSERT COMPANY NAME] within 60 days, should they withdraw from the course prior to completion, or not meet the two conditions outlined above. In such cases the staff member would need to sign a form or other correspondence acknowledging this and the exact amount they agree to repay in such circumstances.

## Procedure:

To apply for **[INSERT COMPANY NAME]**-funded Further Study, an employee must complete the Application to Undertake Approved Further Study form. This must be approved by the applicant’s direct line manager, as well as the relevant General Manager. All relevant documentation regarding the area of potential study must be attached before any further study application can be approved.

Once the application has been approved, it should be forwarded to the HR department who will ensure the staff member signs off on their agreement to this policy and the terms and conditions contained within.

Evidence of satisfactory completion of relevant course units/subjects will be required before funding is released. An expense claim form should be completed and a certified copy of course results shall be provided to the departmental manager within three weeks of receipt of results.

## 4 POLICY REVIEW

**[INSERT COMPANY NAME]** may make changes to this policy from time to time to improve the effectiveness of its operation.

WORKPLACE PARTICIPANT ACKNOWLEDGEMENT

I acknowledge:

I have received, read and understood the policy

I am required to comply with the policy; and

There may be disciplinary consequences if I fail to comply, up to and including the termination of my employment.

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:

APPLICATION TO UNDERTAKE FURTHER STUDY

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Length of Service at Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title of Course: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Education Provider: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expected Course Duration: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of Units: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Please attach a copy of course syllabus to this application form)

Approximate Cost per Unit: $\_\_\_\_\_\_\_\_\_\_\_\_\_

Approximate Cost for additional expenses: $\_\_\_\_\_\_\_\_\_\_\_\_\_

Please specify additional expense items (E.g. text book):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Objective of Undertaking this Further Education

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Benefit to the Company

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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By signing this application, I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (print name), hereby acknowledge, understand and accept the terms and conditions outlined above in the Further Study policy in electing to apply for funding under this Policy.

Staff Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Witness – Print Name Witness Signature Date

Approval:

Manager Authorisation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

General Manager Authorisation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_