



Professional Development Leave Application Form for Medical Officers

This form must be completed by Medical Officers seeking professional development leave or examination leave in accordance with their Enterprise Agreement and Award entitlement. Reference should be made to the relevant Enterprise Agreement.

Forward all requests to your direct line manager for approval. Approved form must be submitted with timesheet for applicable pay period.

Employee Details

First Name: _____ Surname: _____ Employee Number: _____

Contact Email: _____@sa.gov.au

If you are a Medical Practitioner Group employee, are you in an Accredited Training Program? Yes No

If yes, name of Accredited Training Program: _____

Leave Request

Dates (inclusive)		Type of Leave	No. of Days*	Location / Destination (where applicable)	Reason for Leave (e.g conference name)
FROM	TO				
		PD Leave (PDEV04) Examination Leave (PDEV02) Examination Attendance & Travel Leave (PDEV03)			
		PD Leave (PDEV04) Examination Leave (PDEV02) Examination Attendance & Travel Leave (PDEV03)			
		PD Leave (PDEV04) Examination Leave (PDEV02) Examination Attendance & Travel Leave (PDEV03)			

*Only apply for days on which you are actually rostered to work (e.g. if a course runs on Friday and Saturday and you are not rostered for Saturday, only request PD leave for Friday).

Please note: If you are taking any other leave either side of professional development or examination leave you will be required to fill out the appropriate form.

Employee Signature: _____ Date: _____

Direct Line Manager to Complete

As Manager for the Medical Officer named above, I approve the above mentioned leave and certify that it is within their Enterprise Agreement entitlements for professional development leave and / or Award entitlements for Examination Leave and Examination attendance & travel leave, in accordance with the Medical Officer's performance development plan (where applicable).

Leave amount is within employee's available PD entitlement
Form forwarded to payroll services, Shared Services SA for processing

Direct Line Manager Signature: _____ Date: _____

Print Name: _____

Position and Unit/Department: _____

Payroll Use ONLY

- PDEV04 – Medical Officer PDEV
- PDEV02 – Examination Leave
- PDEV03 – Examination Attendance & Travel Leave
- PDEV01 – Professional Development (only used where PD leave type has not been categorised above by MO)

Payroll Function Complete

Name: _____ Signature: _____ Date: _____