Leave of Absence

Students who plan to be absent from the university must fill this form and have it approved by the program director. Students who begin a leave of absence during a semester prior to the eighth week will be assigned a grade of “W.” If a student takes a leave of absence after the eighth week of the semester, he or she will receive a failing grade. The maximum permitted duration of an approved leave of absence is normally one academic year.

Student Name: 

Phone: ________________  e-Mail: ________________  Student ID#: ____________

Current Address

Street 1: ________________________________________________________________

Street 2: ________________________________________________________________

City: ________________  State: ________________  Zip Code: ________________

I will be Absent in the Semester of:  [ ] Fall  [ ] Spring

I will be Absent in the Academic Year of: ______________________________________

I expect to Return in the Semester of:  [ ] Fall  [ ] Spring

I expect to Return in the Academic Year of: ______________________________________

Reason for Leave of Absence: ________________________________________________

I have read and understood the academic catalog and the terms and rules of Leave of Absence Policy.

Student Signature  Date

Bursar Signature  Date

DSO Signature  Date

Registrar Signature  Date