

RETURN TO: College of Graduate Studies

Main Campus 3240 University Hall Mail Stop 933 **Health Science Campus** Mulford Library Room 117 Mail Stop 1042

Request for Leave of Absence

Instructions: Students enrolled in a graduate degree or certificate program, who do not expect to make progress towards degree requirements for a period of time due to personal, medical, call to active military duty, or other compelling reasons may request a leave of absence. To be eligible for a leave of absence, a student must be in a graduate degree or certificate program, have completed at least one term of enrollment prior to the date a leave is to begin, be in good academic standing, and be making reasonable progress toward degree requirements. Prior to requesting a Leave of Absence, graduate students are advised to review the complete Graduate Student Leave of Absence Policy (Number 3364-77-04).

Please note: It is the student's responsibility to ensure this form is routed through the required approval channels of their program/department/academic college, and then submitted to the College of Graduate Studies for final review. All correspondence regarding Leaves of Absence will be sent to student's official University e-mail address. Final notification of the Graduate College decision on the request will be sent via official University e-mail with a copy of the approved form if applicable.

Student Information	
Nar	ne: Rocket ID:
Deg	gree Sought: Program:
	n requesting a leave of absence beginning: Fall Spring Summer 20
I w	ill return: □ Fall □Spring □Summer 20
Note: Leaves of absence are approved for a maximum of three consecutive terms (one calendar year).	
Reason for Request:	
The following item must be attached to this request:	
•	Statement describing progress toward degree completion to date. If there are any incomplete or in progress grades on the academic transcript, the statement must address these courses specifically. If an approved Plan of Study is not already on file with the College of Graduate Studies, this should be attached as well.
•	Supporting documentation.
By signing below, I certify that I understand the following:	
•	If I am registered for the term for which I am requesting leave, I am responsible for complying with the registration

submit a Petition for Administrative Adjustment to the University Registrar (Policy 3364-71-16).

policies governing the dropping or withdrawing of courses as established by the University Registrar. Course dropping or withdrawal does not negate my financial obligations, and I will be held responsible for all balances due to the

university. For consideration of any variation from registration policies for reasons of extenuating circumstances, I must

Course withdrawal is not permitted after the established deadline for each term. If I am applying for leave of absence after the course withdrawal deadline, I should address grading and course completion issues with my individual instructors. For consideration of any variation from this rule for reasons of extenuating circumstances, I must submit a Petition for Administrative Adjustment to the University Registrar (Policy 3364-71-16). It is my responsibility to resolve all issues pertaining to registration, financial support, federal financial aid, and outstanding balances owed to the university. It is also my responsibility to consider potential implications of a leave on such matters as immigration status, health insurance, and loan repayment, if applicable. The purpose of an approved leave is to preserve my status in my graduate degree program and to document that the approved time taken is not included in the time limitations for degree completion. A leave of absence approved in accordance with this policy (3364-77-04), does not constitute a leave of absence for federal financial aid purposes. I may not make significant use of university resources and services and I do not have the rights and privileges of a registered student during an approved leave of absence. I cannot fulfill any official department or university requirements during the leave period. I must follow the processes established by my program/department/academic college, and my request will only be considered by the College of Graduate Studies after completion of my academic college level approval processes. I must complete the Application for Graduate Readmission at the end of the leave in order to register and to have the rights and privileges of a registered student. If I do not return within the approved period for which the leave is granted, I will be considered as having withdrawn from the university. If extenuating circumstances necessitate requesting an extension of my leave of absence, I must request the extension before the last day of the term for which my approved leave ends, and it is subject to approval of the program, academic college, and College of Graduate Studies. Student Signature Date College Approval Advisor (printed) Signature Date Chair or Program Director (printed) Signature Date Associate Dean, Degree Program (printed) Signature Date **College of Graduate Studies Approval** Dean, College of Graduate Studies Date

For College of Graduate Studies Administrative Use Only:

Date of Final Student Notification: _____ Entered in COGS Database: _____