



Academic Leave of Absence Request Form

Office of the Registrar

A Leave of Absence is a temporary interruption in a student's program of study, requires approval from the academic department chair, and will only be granted to a student with the specific intention to return to full-time status at the end of the leave. To use this form you must be a full-time student in good standing (academic and financial). The request must be submitted prior to **June 15th** for any leave requests for the fall semester and prior to **December 1st** for any leave requests for the spring semester. If the request for the leave is denied, the student may petition the Academic Policy and Standards Committee.

[A financial aid Leave of Absence may not be for more than 180 days by federal regulations, is a separate form found in the Financial Aid Office, and must be approved by the Director of Financial Aid.]

Student ID # _____ Personal email _____

Name _____ Date submitted ___/___/___

Address _____
(Street) (City) (State) (Zip)

Reason for leave request: military duty medical personal other
Explain reason below

Leave start ___/___/___ Return semester fall spring summer Year: _____

Note: A student not returning from an approved Leave of Absence will be administratively withdrawn from the institution. The withdrawal date will be retroactive to the leave start date.

Student signature Date: ___/___/___

Comments: _____

Department chair _____/___/___
Date

Financial aid officer (confirmation of effective date) _____/___/___
Date