



Leave of Absence

Leaves of absence can be taken for no more than one year. In order to reactivate one's student file, the student must enroll at the conclusion of their leave.

Please fill out this form and submit it to the Registrar.

Student Information	
Student Name: _____	Today's Date: _____
Student ID #: _____	Class Year: _____
Degree Program: _____	Concentration: _____
Primary Phone: _____	Email: _____
Permanent Mailing Address: _____	
Have you received a full-tuition scholarship from the College? ___ Yes ___ No	
Advisor's Name: _____	

I elect to take a voluntary leave of absence: _____

Starting	_____ Fall	_____ Spring	_____ Summer	of Year: _____
Returning	_____ Fall	_____ Spring	_____ Summer	of Year: _____

Reason: _____

Did any of the following conditions contribute to your decision? (Check as appropriate)
Financial circumstances _____ Medical conditions _____ Other personal or family emergencies _____
Any comments you wish to add?

Advisor's Signature: _____ Date: _____

Registrar's Signature: _____ Date: _____