

Request for Leave of Absence

Name				Stu	Student ID #			
Classification:	☐ FR	□ so	□JR	☐ SR	☐ 2 nd Degree	☐ Graduate		
_	_	-				e for one or two sen		
an approved lea	ave of abse	nce may ret itial matricu	turn under ulation. If t	the same c he student	atalog and genera	e of absence. The sill education requirer lum has changed duitements.	ments in	
Procedure:								
The student mulast day of the a	· ·	=	for Leave	of Absence	form obtained fro	om the Registrar's O	ffice by the	
Procedure to Re	eturn:							
				-	•	o request re-instate student must be adv		
cleared by the a	advisor in o	rder to regi	ster.		-			
reason for leav	e or absence							
		•						
Semesters for w	vhich leave	of absence	is requeste	ed:				
Please obtain si	gnatures in	the followi	ing order:					
Student Signature					Dat	 Date		
Advisor Signature					 Dat	 Date		
Department Chair					Dat	Date		
Student Services Center Signature					Dat	Date		
Registrar's Office					 Dat	 Date		