



REQUEST FOR LEAVE OF ABSENCE FORM - INTERNATIONAL STUDENT

In order to be eligible for leave of absence, you are required to be enrolled as a full-time student for at least 1 academic quarter. A leave may only be requested a quarter at a time. Other restrictions may apply.

STUDENT ID # _____ SEVIS ID #: _____

STUDENT NAME _____
Last First Middle

CONTACT INFORMATION DURING LEAVE OF ABSENCE (E-MAIL ADDRESS) _____

Primary reason for Leave of Absence: Please check one of the following:

- Medical - Remain in U.S. *
Medical - Travel outside of U.S. * (Attach a copy of flight itinerary)
Personal - Travel outside of U.S. ** (Attach a copy of flight itinerary)

* Leave of Absence for medical conditions must include documentation from licensed doctors to substantiate the medical conditions.
** Leave of Absence for personal reason can be granted for no more than 1 quarter per academic year.

Leave of Absence that will exceed 5 months must:

- Require to apply for re-admission
- Request a new I-20 3 months prior to intended return date and pay the SEVIS I-901 fee
- Apply for a new F-1 Visa even if the current F-1 visa is still valid
- Enter the U.S. no earlier than 30 days before the start date on the new I-20

Leave of Absence cannot exceed 180 days in any 12 -month period. Time during an approved leave of absence will not be included in the calculation of the maximum proram length. A student who wishes to take a leave of absence must make the request prior to or on the first day of instruction by completing the Request for Leave of Absence Form.

The Leave of Absence is effective only when the Academic Dean has granted permissions for this leave. A student who has taken a leave of absence without the Academic Dean's permissions will not be considered a continuing student and may be considered as withdrawn.

Please indicate which quarter you wish to request as Leave of Absence quarter:

- WINTER 20____
SPRING 20____
SUMMER 20____
FALL 20____

IMPORTANT: FAILURE TO REPORT TO INTERNATIONAL STUDENT ADVISOR IMMEDIATELY AFTER RE-ENTRY TO THE U.S. FOR STATUS VERIFICATION COULD RESULT IN NEGATIVE CONSEQUENCES FOR YOUR F-1 IMMIGRATION STATUS.

I have read all the rules and regulations stated above. I certify the above information is accurate to the best of my knowledge. I am aware that I must provide documentation to support my request and it is my responsibility to meet with the International Student Advisor.

Signature of Student _____ Date _____

OFFICE USE ONLY This is to confirm that the above named student is currently a student at California University of Management and Sciences. The student will be taking Leave of Absence during the above mentioned dates and intends to enroll for the following quarter.

Academic Dean Signature Date

Finance Officer Signature Date

International Student Advisor Signature Date

Recorded by Registrar Signature Date