REQUEST FOR LEAVE OF ABSENCE FORM (L)

In order to be eligible for leave of al	·		dent for at least 1 a	academic quarter.
A leave may only be requested a qu STUDENT ID #	ıarter at a time. Other restriction	ns may apply.		
STUDENT NAME		First		Middle
CONTACT INFORMATION DURING L	EAVE OF ABSENCE (E-MAIL ADI	DRESS)		
Primary reason for Leave of Absence: Please write in detail. (If needed, attach a separate statement)				
A leave may only be requested a quarter of absence will not be included in the cal request prior to or on the first day of inst	Iculation of the maximum program	length. A Student who wishe		
The leave of absence is effective only when the Academic Dean has granted permission 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of absence without the Academic Dean's permissions will not be considered a continuing student and may be considered as withdrawn.				
Students receiving Financial Aid Title IV loans who fail to return to the University from an approved leave of absence will be considered as withdrawn and will be reported to the lending institution by the University. Consequently, loan deferment and repayment schedule may be affected.				
Non-comliance with Federal regulations regarding leave of absence can jeopardize a student's eligibility for future financial aid and loan payment deferment.				
Please indicate which quarter you wi	ish to request as Leave of Absen	ce quarter:		
WINTER 20	SPRING 20	SUMMER 20	[FALL 20
I have read and understood all the rule	es and regulations stated above. I	certify the above information	on is accurate to the	best of my knowledge.
Student				
OFFICE USE ONLY	Signature		Date	
Academic Dean	Signature		Date	
Finance Officer				
	Signature		Date	
Recorded by Registrar				
· •	Signature		Date	