## **Personal Leave of Absence**

A personal leave of absence may be granted for one semester to students in good academic and social standing for whom personal matters require a temporary absence from the University. At the termination of the leave, the University will send appropriate materials as explained on the attached information sheet. It is the student's responsibility to have courses taken out of residence pre-approved using the University's *Permission to Study Out of Residence Form* and to keep the Director of Second-Year, Transfer & Transition Initiatives informed of any changes in the student's academic or personal status. There will be an Out-of-Residence fee for maintaining matriculation. (See the Catalogue, Special Fees, for more information.)

NAME:					
STUDENT ID #:					
<b>Classification</b> : Freshman	Sophomore	Junior	Senior	Major:	
Date leave to go into effect	•	<u>Exp</u>	xpected date of return:		
Reason for leave (or attack	ı brief essay):				
Student expects to take co	urses out of res	sidence?	Yes No		
Permanent Information:					
Address:					
Phone:		Preferred Email:			
Fax:					
The information contained of			ne best of	my knowledge.	
Student Signature		_		Date	
Director of Second-Year, Ti	ransfer & Trans	ition Initia	tives Signa	ature	
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Assistant Provost, Academic	e Achievement	Center, Sig	gnature		

\*\*\* This material was received by telephone. The student is being sent a copy of the form and pertinent information to complete and return. Yes or No