



Petition for a Leave of Absence

Name _____ ID Number _____

Email _____ Phone _____ Dept. _____

Academic Policy on Leave of Absence from Graduate Study

The request must not exceed two consecutive academic semesters. In exceptional circumstances, a leave can be extended for another two semesters. The maximum amount of leave permitted per graduate program is four semesters. A leave of absence does not extend the maximum time permitted for the completion of degree requirements, and a leave cannot be taken while students are on extension of the five-year time limit.

Maternity, paternity or military obligations do not count toward the five-year time limit for degree completion. The length of the extension caused by maternity, paternity or military leave of absence may not exceed two years.

If requesting a medical leave of absence, please provide additional documentation from your health care provider.

I am requesting a:

- | | |
|---|--|
| <input type="checkbox"/> Leave of Absence | <input type="checkbox"/> Military Leave of Absence |
| <input type="checkbox"/> Maternity/Paternity Leave of Absence | <input type="checkbox"/> Medical Leave of Absence |

through:

- Fall of _____ Spring of _____ Summer of _____

In the space below, provide an explanation to support the reason for the leave of absence if not requesting a maternity, paternity or military leave of absence (please print legibly). You may attach a typed statement if you choose.

Signatures

Student _____ Date _____

Faculty Advisor _____ Date _____

Department Chair _____ Date _____

Dean of Graduate Studies _____ Date _____