Policy Regarding Extension of Leave of Absence

- This form may be used by undergraduate students who are on an approved leave of absence.
- A leave of absence, including extensions, is not given for more than two years. This maximum two year period applies even when the sessions of leave are not consecutive.
- A student who does not enroll by the end of the leave of absence is considered to have voluntarily withdrawn from the University.

All information is required to process this request.

Student Information (To be completed by the student)

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Initial</th>
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<tbody>
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<thead>
<tr>
<th>Street Address</th>
<th>City</th>
<th>State</th>
<th>Postal Code</th>
</tr>
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(_______)_______________________________   _________________________________
Preferred Contact Phone Number   Student Identification Number

Student Certification
I affirm that I have read the policy outlined above and am requesting an extension of my approved leave of absence.

Signature of Student

Date

Administrative Certification (To be completed by the Office of Retention and Advising)

An extension of the previously approved leave of absence for this student is approved. The student must return by the following semester/session:

Semester/Session:  ☐ Fall  ☐ Summer I  ☐ Spring  ☐ Summer II  Year: 20___

☐ The student has permission for automatic reactivation

☐ The student must present a Reactivation Form to the Office of Retention and Advising

Office of Retention and Advising

Date

Form Received: _____/_____/____  Leave of Absence Processed: _____/_____/____  By:_________