

REQUEST FOR LEAVE OF ABSENCE

If circumstances exist such that a degree-seeking student is temporarily unable to continue work (e.g., health or family issues) in the graduate program or with the thesis project during contiguous semesters, this form must be completed by the candidate and submitted to the Director of Graduate Studies within the first 4 weeks of the semester of absence from the program or non-registration for a course. The Graduate Committee will consider the request for a leave of absence at its next regularly scheduled meeting. Upon approval of the request, the Director of Graduate Studies will notify the candidate.

Name:	Anticipated Graduation Date:
Semester(s) of requested leave:	
Committee Chair or Advisor:	

Below provide a detailed reason for requesting a leave of absence from the graduate program.

Candidate Signature:	Date
Director of Grad. Studies Signature:	Date