

PACIFIC SCHOOL OF RELIGION

REQUEST FOR A LEAVE OF ABSENCE

This request must be filed in the Academic Advisement and Registrar Office before the end of the registration period of the semester for which the leave is being requested. If a student does not register for a semester and does not request a leave for that semester, s/he will be terminated as an active student and must contact the Admissions Office to apply for re-admission. A maximum of two semesters of leave can be requested at one time. GTU MA students will be charged a Leave of Absence fee if application is approved. Please note that all leaves of absence are included in the applicable lapsed-time period for the completion of programs at PSR.

Name: _____ Date: _____

Address during leave period: _____

Email _____ Phone during leave period: _____

Note: You are required to check your PSR email account and update PSR with your contact information if it changes, even while you are on leave. Failure to do so may lead to termination of your student status.

I started in the _____ program in _____(sem/yr).

I request a leave of absence for _____ semester(s), _____ academic year.

I plan to re-enroll _____ semester/year

The purpose of the leave:

The proposed outcome of my program at PSR (include a graduation date, if possible):

Advisor's signature _____ Date _____

Your advisor's signature indicates s/he is aware of your plans for the leave. If your request is approved, you will receive a confirmation email carbon copied to various appropriate offices within PSR and the GTU.

Office use only

Request granted _____ Date _____

2/06