

## Leave of Absence Request for Doctoral Students

Students enrolled in a doctoral program may apply for a leave of absence each term (Fall or Spring), for no more than two long semesters and not to exceed one year, when events such as illness or injury, active military service, or the need to provide care for a family member prevent active participation in the degree program. Requests must be approved in advance of the leave of absence by the Graduate Program Coordinator, Department Chair/School Director, Academic College Dean or designee, and the Dean of the Graduate College or designee. Under no circumstances may a leave of absence be applied retroactively.

A leave of absence will prevent the student from receiving student funding from his or her program and the Graduate College and may affect ability to receive financial aid or loans and/or to defer payments on loans. Students should contact the Office of Financial Aid with questions regarding financial aid or loan status.

The student on leave must reapply for admission in order to return to the University, but readmission during the approved period of the leave is automatic and the application fee is waived. A leave of absence does not change the time limit for completion of the student's graduate program of study. A student returning from a leave of absence must enroll for the following Fall or Spring semester or provide a written request for a leave of absence extension (a leave of absence may not exceed one year throughout the student's degree program).

**Time for Submission:** A leave of absence request should be submitted no later than or during the semester prior to the requested leave. In the event that this is not possible, the request should be submitted as soon as the student is aware that he or she will not be able to register for any given semester.

**Instructions for Submission:** Fill out form, secure appropriate signatures, and submit the original signed form to the Graduate College along with the following documents:

- Student's specifications on why a Leave of Absence is needed
- Supporting letters (if applicable)

### A. STUDENT INFORMATION

Name		UTRGV Student ID #	
Street Address	City	State	Zip Code
Email Address		Phone Number	
Degree/Program		College	
International Student?	Yes	No	
<b>Note: International students must inform International Programs office prior to leave of absence.</b>			
Have you previously been granted a leave of absence?	Yes	No	If yes, dates:
Date Admitted to Program:			

## B. LEAVE OF ABSENCE PERIOD REQUESTED

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Reason for requesting leave. (If additional space is needed, please attach a separate sheet.)

Leave of Absence Requested:

to

Plan to Return:

Student Signature

Date

## C. SIGNATURES AND APPROVALS

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Dissertation Committee Chair, Signature <small>(if applicable)</small>	Print Name	Date	Approve	Disapprove
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Graduate Program Coordinator, Signature	Print Name	Date	Approve	Disapprove
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Department Chair, Signature	Print Name	Date	Approve	Disapprove
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Academic College Dean or Designee, Signature	Print Name	Date	Approve	Disapprove
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## GRADUATE COLLEGE USE ONLY

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I hereby

Approve

Deny the request

Associate Dean of The Graduate College, Signature  
*Dr. Sandra Hansmann*

Date

Comments: