

LEAVE OF ABSENCE REQUEST FOR GRADUATE STUDENTS

Students enrolled in a graduate 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.

Procedure 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)

STUDENT INFORMATION

Name		UTRGV Student ID #	
Street Address	City	State	Zip Code
Email Address		Phone Number	
Degree/Program		College	

International Student? Yes No

NOTE: International students must inform International Programs office prior to leave of absence.

Have you previously been granted a leave of absence? Yes No If yes, dates: _____

Date Admitted to Program: _____

LEAVE OF ABSENCE PERIOD REQUESTED

***Please attach a letter detailing your reason for requesting leave.**

Leave of Absence Requested: _____ to _____ Plan to Return: _____

If you have an extenuating circumstance, please see the Leave of Absence Extension request form.

Student Signature

Date

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APPROVALS

Dissertation Committee Chair if applicable, Signature *Print Name* _____ Approve Disapprove
Date

Program Coordinator, Signature *Print Name* _____ Approve Disapprove
Date

Department Chair, Signature *Print Name* _____ Approve Disapprove
Date

Academic College Dean, Signature *Print Name* _____ Approve Disapprove
Date

THE GRADUATE SCHOOL

I hereby Approve Deny the request.

Dean of The Graduate School, Signature *Date*

Revised 8/5/2019