

APPLICATION FOR LEAVE OF ABSENCE

Leave of Absence Policy of the School of Marine Science

A leave of absence shall be granted for a specific period of time, e.g., one semester or one year, but is limited to a maximum of one year for the duration of the student's degree program. The student is relieved of the obligation of paying tuition during the period of the approved absence; however, it is understood that a student on leave of absence is not present on campus and drawing upon campus resources.

Students approved for a leave of absence will have their time limit for degree completion requirement stopped for the duration of the approved period. Upon return from approved leave, the student's time limit to degree completion count will resume.

A student must terminate the leave of absence and be a registered student in the semester in which his or her degree requirements are completed or in which he or she graduates.

STUDENT: _____ DATE OF ENTRY _____
(Please Print Name)

I request a leave of absence from the **M.S. / Ph.D.** program beginning
_____ and ending _____
Month / Date / Year Month / Date / Year (or Semester/Yr of return)

Having entered the program in ____/____, I anticipate completing my degree
in _____. Date: _____ Student's Signature: _____
Month / Year

MAJOR PROFESSOR RECOMMENDATION

RECOMMEND / DO NOT RECOMMEND

MAJOR ADVISOR OR CO-ADVISOR

Co-Advisor

DEPARTMENT RECOMMENDATION

RECOMMEND / DO NOT RECOMMEND

Signature of Department Chair

ACTION OF THE ASSOCIATE DEAN OF ACADEMIC STUDIES

RECOMMEND / DO NOT RECOMMEND
(Comments on Reverse Side)

DATE: _____ Signature of Associate Dean of Academic Studies _____

MAILING ADDRESS DURING LEAVE OF ABSENCE

Home Phone: _____
(Area Code) Number

Work Phone: _____
(Area Code) Number
City State Zip

RETURN THIS APPLICATION Associate Dean, c/o SMS Registrar Watermen's 253