

SAMPLE

REQUEST FOR A LEAVE OF ABSENCE

Type of print with a ball-point pen

Requirements: Students admitted winter quarter 1990 or later are expected to register continuously: leaves of absence are granted only under extraordinary circumstances, such as medical or family emergency. See the "Leave of Absence Information—Questions and Answers" sheet for additional information.

Name	<u>Chester Brown</u>
Address	<u>1223 Green St.</u>
City, State	<u>Santa Barbara CA Zip: 93105</u>

Perm # 456678
Phone 966-8222
E-mail brown@geog.ucsb.edu
Dept. Geography

Reason(s) for requesting leave:

I request a leave for the following quarters:

- Medical emergency (attach doctor's note)
- Family emergency (describe below)
- Filing fee quarter (terminal degrees only)
- Other (explain below)

- Fall 2001 (year)
- Winter _____ (year)
- Spring _____ (year)

I will return Winter quarter, 2002 year

Explanation of request:

Broke my leg in 3 places.

Conditions for leave: I agree to inform the Graduate Division of my intention to return 4 weeks before the beginning of the quarter in which I will return. If I absent myself for a period longer than that covered by this leave of absence, I understand that I must file a petition for reinstatement or reapplication for admission according to the published schedule, and that reinstatement or readmission is subject to the approval of the department and the Graduate Division.

Students Signature Chester Brown Date 9/5/01

approve Lise Washburn Date 9/5/01
 deny _____
Signature of Departmental Graduate Advisor required

approve _____ Date _____
 deny _____
for the Graduate Division

Note to the student: This petition must be signed by the Departmental Graduate Advisor or Department Chair, *not* your Personal Advisor. You will receive a copy when the Graduate Division has finished processing the petition.

Fee: \$15.00 _____
Check payable to *UC Regents* or
BA/RC stamp required.
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