

**REQUEST FOR LEAVE OF ABSENCE**

Name \_\_\_\_\_ Subject area \_\_\_\_\_

Address \_\_\_\_\_ Student ID# \_\_\_\_\_

\_\_\_\_\_ Phone \_\_\_\_\_

Semester of admission \_\_\_\_\_ Semester of requested leave \_\_\_\_\_

Reason for request:

Professional education courses completed and passed (by number only):

\_\_\_\_\_  
\_\_\_\_\_

Professional education courses in progress (by number only):

\_\_\_\_\_

Professional education courses remaining (by number only):

\_\_\_\_\_  
\_\_\_\_\_

Circle appropriate subject matter option and fill in date:

Subject Matter Program    1) completed \_\_\_\_\_    2) will complete \_\_\_\_\_

CSET    1) passed \_\_\_\_\_    2) plan to take \_\_\_\_\_

Subject area courses still needed: \_\_\_\_\_

I understand that I must notify the Department Chair, *in writing*, of my intention to reenter the program (by April 1 for Fall Semester or November 1 for Spring Semester) and that this leave is for ONE semester only. **If I wish to extend this leave beyond one semester, I must have the approval of the Department Chair and I must apply for readmission to the program and university.**

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

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FOR OFFICE USE ONLY

Request **approved / not approved**

Faculty Advisor \_\_\_\_\_ Date \_\_\_\_\_

Request **approved / not approved**

Department Chair \_\_\_\_\_ Date \_\_\_\_\_

cc: \_\_\_\_\_ Credentials Office    \_\_\_\_\_ Department    \_\_\_\_\_ Student    \_\_\_\_\_ Nancy Case-Rico (Dir. Field Placement)