

# Worcester Polytechnic Institute

Office of the Registrar

## Graduate Institutional Leave of Absence Form

**Instructions:** Fill out Part I. Submit the completed form to the Office of the Registrar. Submission of the form is required for any tuition adjustment that may be due.

**Important information:** Please be sure you have cleared any obligations at the time of LOA, including any outstanding financial balances, the return of equipment or keys to the issuing authority, and any books to the library. *Failure to clear obligations will result in a hold on your academic record prohibiting the release of official transcripts.* Students should inform themselves about consequences to financial aid, visa status, housing, and other considerations before taking a leave. If you are a financial aid recipient, you may have additional financial obligations to meet once your aid is recalculated based on your official leave date. If you are an international student you must visit the International House to inform them of your leave.

### Part I: Student Section (please print)

Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Home Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address: \_\_\_\_\_ Graduate Program: \_\_\_\_\_

### Leave of Absence Effective Date Requested:

Semester (e.g. Fall 2017): \_\_\_\_\_ Last Date of Attendance\*: \_\_\_\_\_

\*Please note: You must plan to depart the campus within 48 hours unless other arrangements are made.

Intended Semester of Return: (check one)  Fall  Spring  Summer Year: \_\_\_\_\_

\*Leaves are approved for the remainder of the current semester (if applicable) and the subsequent semester (fall or spring only; summer is not counted). A leave can be renewed for one additional semester. Renewal requests must be received before the leave expires.

### Reason for Leave (please check all that apply):

Medical  Academic  Financial  Personal  Family Obligation  Other

Comments: \_\_\_\_\_

Your financial obligations may not be final at the time this form is filed, so please check your email and/or mail for notifications. By signing below, you acknowledge that you will be financially responsible for paying all charges associated with your account before you can return to the University. You also acknowledge that the last date of attendance is truthfully reported and will be verified with professors and other University officials.

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

### Registrar Use Only

Signature: \_\_\_\_\_ FINAID \_\_\_\_\_ Tuition %: \_\_\_\_\_

Date: \_\_\_\_\_ NOTES \_\_\_\_\_ WDSU \_\_\_\_\_

Letter w/Attachment \_\_\_\_\_ MW Tracking: \_\_\_\_\_

Leave Expiration Date: \_\_\_\_\_

CC: International House, Office of Housing/Res Life, Bursar's Office, Office of Student Aid and Financial Literacy