



## Office of the Registrar and Financial Aid

251 Tennessee Street

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LA

2008-2009

### LEAVE OF ABSENCE FORM

#### This form is to be used if:

1. Student is currently enrolled and is completing the academic quarter, but will not be returning next qtr because of LOA.
2. Student is currently enrolled and wishes to take a Leave of Absence (LOA)

#### To be completed by student:

Name:	SSN or Student ID
_____	_____
Address/Phone/E-mail:	Last Day you attended class?
_____	_____
_____	_____

#### Leave of Absence (LOA):

<p>Please circle the reason: Military   Research   Maternity   Family Obligations   Illness   Hospitalization          Personal/Financial   Other: _____</p> <p>Reason Explanation:          _____          _____          _____</p> <p>When will you return? _____</p> <p>If you are currently enrolled are you completing the academic quarter?   <input type="checkbox"/> Yes   <input type="checkbox"/> No</p>
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Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### Approval Signatures:

Site Administrator Signature	_____	Date: _____
Dean of Students Signature	_____	Date: _____
Financial Aid Officer Signature	_____	Date: _____

Financial Aid Recipient:    Yes    No

#### School Use Only:

Comments: _____
_____
_____