

**Date**

**Major Advisor Signature**

**(Please Print)**

**Major Advisor**

**Student Signature**

**Telephone Number**

**Email Address**

**Zip Code**

**State**

**City**

**UID Number**

**Middle Name**

**First Name**

**Student’s Last Name**

**Mailing Address**

**Student Petition for a Leave of Absence**

The Graduate School, University of Memphis, 201 FedEx Institute

Phone: 901.678.4212 / Fax: 901.678.0378

This form is for students who must take a leave of absence within the *final stage* (dissertation, thesis, final project) of their degree program due to circumstances outside of their control. Appropriate documentation must be provided by the student and approved by all signatories. **The student must be in good academic standing to request a leave of absence.**

**To be completed by student:**

 **U**

**Overall GPA**

**Student Level**:

Master’s

Doctoral

**Major**

**Reason for Leave**:

Medical

Military

Personal

**Please attach all relevant documents to this form**. Acceptable documents include:







**Medical** (Physical or Psychological): A letter from a health-care provider.

**Military**: A copy of your military orders.

**Personal**: A short letter explaining your circumstances, detailing the reason for the leave request as well as third party supporting documentation.

I formally request a leave of absence for the following semester:

Fall

Spring

Summer

 (Year)

I will resume my studies for the following semester:

Fall

Spring

Summer

 (Year)

**Date**

**To be completed by the student’s department:**

**Action:**

Request Approved

Request Denied

**Reason:**

**Action:**

Request Approved

Request Denied

**Reason:**

**Department Chair Name (Please Print)**

**Department Chair Signature**

**Date**

**Action:**

Request Approved

Request Denied

**College Director of Graduate Studies (Please Print)**

**College Director of Graduate Studies Signature**

**Date**

Both the student’s Thesis/Dissertation Chair and the Department chair must approve this form before approved by University of Memphis administration.

**To be completed by The Graduate School:**

**Action:**

Request Approved

Request Denied

**Reason:**

**Graduate School Dean/Designee (Please Print)**

**Graduate School Dean/Designee Signature**

**Date**