

## **Leave of Absence**

A Leave of Absence is an official period of time during which a matriculating student is not currently enrolled. A student may request that a leave of absence start during a semester in which a student is currently enrolled, or start with the next semester on the academic calendar. In the event that a student starts a leave of absence during a semester, all courses on the student's transcript for that term will be assigned grades of "W" to indicate a withdrawal from those courses if the leave begins after the drop period. The transcript will also indicate "Leave of Absence" for the term in which the grades of "W" appear. A leave of absence, including extensions, is not given for more than two years. To request an extension of an approved leave of absence, students submit the "Leave of Absence Extension" form to the Office of the Registrar prior to the termination date of the approved leave. For a Leave of Absence to be official, this completed form should be submitted to the Registrar's Office.

Student Name:	ID:	Major:		
Date that Leave will begin:	OR Sen	nester that Leave will begin:	ave will begin:	
Current Address:				
Phone:	Mobile:			
Non-Keystone email:				
Reason for Leave:				
their leave under the following conditi  (1) They are in good academic a coordinator when their leave  (2) Their leave is limited to one y  (3) They maintain current contact  (4) They understand that this po	ons: nd social standing at the College begins. rear but may be renewed for up to tinformation with the Registrar	ved leave begins will remain in effect when they re- and have consulted with their academic adviser o o one additional year with the approval of the Regi- s Office throughout the time of the leave. offer their curricula or major programs, which may of absence.	r program strar.	
	urther, students who begin a lea	lender to be not enrolled in school and will receive we during a semester should consult the refund pol Office.		
A student who does not enroll by the other that case, formal request for readmis		nsidered to have voluntarily withdrawn from the Coffice of Admissions.	ollege. In	
Student Signature:		Date:		
cc: Academic Advisor, Academic Affai	rs Office			
	FOR OFFICE USE	EONLY		
Date Received	Initials	Date of Leave Terminat	ion	

Registrar's Office ■ One College Green ■ P.O. Box 50 ■ La Plume, PA 18440-0200 ■ (570) 945-8224 ■ registrar@keystone.edu

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