



Leave of Absence Form

Student Name: (Print)		Student ID Number:	
Current Semester:		Telephone Number:	
Email Address:			
Mailing Address:			

Reason Requesting Leave of Absence (please check those that apply)

Leave of Absence Dates

What is the date you request your leave of absence to begin?

What is the date you plan on returning from your leave of absence? (Must be at the beginning of a semester)

<input type="checkbox"/>	Health Reasons	<input type="checkbox"/>	Military Service	<input type="checkbox"/>	Other (Explain below)
<input type="checkbox"/>	Personal Reasons	<input type="checkbox"/>	Financial Issues		
<input type="checkbox"/>	Jury Duty	<input type="checkbox"/>	Religious Service		

Student Initials:

- Taking a leave of absence may affect your student account. See the Bursar's Office prior to submitting this form.
- If a student fails to return to the University by the date indicated above, their scholarship and federal student aid eligibility may be affected. See your Financial Aid Advisor prior to submitting this form.
- Requesting the Leave of Absence does not guarantee that it will be granted. Students will be notified via email if their leave has been approved or denied.
- Submit this completed form, with **all** the required signatures and supporting documents to your department chair for review.
- International students cannot take a LOA **and remain in the U.S.** unless they are on a medical reduced course load that has been previously approved by the ISO.

Student Signature	Date
Financial Aid Signature: (For <i>Permanent Residents/U.S Citizens only</i>)	Date:
Comments:	
International Student Office: (For <i>International Students only</i>)	Date:
Comments:	

NAU Official Use Only

Department Chair Signature:		Department Chair Approve or Deny	
		Approved <input type="checkbox"/>	Deny <input type="checkbox"/>
Date Approved:	Date Denied:	Reason for Denial:	