## THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL The Graduate School

## Request for Leave of Absence

Note: To be eligible for a leave of absence, a student must be in good standing, must not have received an extension of the time limit for the degree, and must not have temporary grades of IN or AB on course work taken. During the leave no formal academic progress can be made.

Student's Name			PID#	
Address			Phone #	
Major:	Degree Inte	nt:	Date Entered:	
Period of leave requested:	Н	Have you received previous leaves: no yes		
(month/year)	(month/year)			
Section I - to be completed by student. Please explain the need for a leave of absence from graduate study.				
(attach additional sheets as necessary)				
Section II - to be completed by program. Please indicate why you support or do not support this request. If you support this request, please describe any program requirements which the student must meet to resume his/her enrollment.				
Request approved:		Not approved: _		
Director of Gra	duate Studies Date (attach additional sl	neets as necessary)	Director of Graduate S	tudies Date
International students <u>must</u> obtain approval of International Center:			Date:	
Graduate School Action:	approved	associate dean signature	Date:	
Ray 7/00	_ not approved	associate dean signature		