

**Simmons College
College of Arts and Sciences
Graduate Programs**

PETITION FOR LEAVE OF ABSENCE

A student submits a Petition for Leave of Absence when s/he plans to return after time away from the College.

Name _____ Program _____
Address _____ ID Number _____
_____ Telephone Number _____
City State Zip

Students who successfully petition for a leave of absence are expected by the College to understand the relationship of their leave to their program of study. Therefore, petitions for leave are sought only by students who have carefully planned their sequence of courses, understand when particular courses are normally offered, and know the date by which they must complete their degree requirements.

Have you previously taken a leave of absence? _____ If so, when? _____
Request for leave of absence beginning _____ until _____

Note: No more than one year of leave of absence is customarily allowed. After this time you must complete a Request for Readmission to Active Status.

Reason for leave:

Course(s) Completed:	Credit:	Course(s) Completed:	Credit:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I have read and understand the above regulations: _____
(Student Signature) (Date)

When this petition is complete and all signatures have been obtained, you will receive a copy confirming approval. Please notify the Registrar and the Program Director one month prior to return.

SIGNATURES OF APPROVAL:

Program Director _____ Date _____
Dean of College _____ Date _____

Copies of completed forms sent to: Registrar, Financial Aid, Graduate Admissions, Program Director, Student