

FIDN:

Office of Academic Records **Leave of Absence Form**

First Year, Second Year, and Junior FCRH/FCLC students: Please meet with your academic advisor prior to submitting this form. FCRH/FCLC Seniors: Please meet with your Class Dean prior to submitting this form. All other students: Please print, sign, and take completed form to your school's Dean's Office.

| itudent Name: Email: | | Contact #: | | | | |
|---|--|--------------------------------|---|------------------------------|--|--|
| College: | Campus: | Program: Class of: | | | | |
| I intend to take a Leave of Absence. | Effective: | Reason: | if OTHER, please specify: | | | |
| What is the last date you plan to attend or at | tended classes? | | When do you plan | on returning to Forc | lham? | |
| Please read each item carefully and initial that you understand the terms and conditions: | | | * INTERNATIONAL STUDENTS: I am a F1 or J1 Visa Student If you are a F 1 or J1 Visa Student, you must contact OIS and your Class Dean/FCRH or FCLC Advisor (first-years only) prior to completing this form. | | | |
| * I understand that I am responsible for all outstan | ding financial obligations to the Un | iversity. | Deany Chire | or rece havisor (mst years t | omy, phor to completing this form. | |
| * I receive financial aid, and understand an Enrollr discuss any possible financial implications of my v | · · | | * I receive VI | ETERAN benefits | l do not receive financial aid | |
| For further information regarding the Univers | ity's refund policies for students who | withdraw from all or a portion | of their studies, <u>click h</u> | ere. | | |
| , | mpus housing, and understand a Residential Life Representative is assist with necessary steps required for withdrawal. | | I do not reside in campus housing | | Undergraduates Only: If you have been accepted to a study abroad program for the current or a future semest please check this box and contact studyabroad@fordham.edu for guidance. | |
| Student Signature: | | Date: | This date will henceforth be known as your "Intent Date" and where applicable, is the date Academic Records will use to indicate the start of your LOA. | | | |
| For Dean's/FCRH or FCLC Advisor's Use: | | | | 1 Acades | nic Related Activities | |
| Last date of Academic Related Activity ¹ | | | | | Class | |

Date signed:

- Examination or quiz
- Completed or handed in an assignment, paper or project
- Tutorial
- Computer-assisted instruction
- Academic Conference
- Attended an institution run study group where attendance was taken
- Dissertation mentoring or advisement

For Academic Records Use:

Conditions for return:

Additional Comments:

Dean's/Advisor's Signature: Conditions