## LEAVE OF ABSENCE / PERIOD OF NON-ENROLLMENT

## REGISTRAR'S OFFICE



Student Name	Student ID	Phone Number		
PERIOD OF NON-ENROLLMENT				
$\Box$ Courses needed are not offer	red			
Financial				
Other				
Please provide brief explanation				
	LEAVE OF ABSENCE			
Medical				
Other				
Please submit documentation to	support your Leave of Absence.			

## Please read the following and sign:

A student who desires to be absent from the university due to a personal or medical circumstance must submit this application for a leave of absence or period of non-enrollment. If a student is requesting a medical leave of absence, the student must provide medical documentation. If the LOA is approved, the student will be guaranteed readmission at the end of the specified time. If a student has attended another institution, transcripts would be required. Failure to return to Tusculum University from an approved leave of absence will result in a withdrawal from the school. If a student is approved for a leave of absence, their enrollment will be reported as a separation to their loan holder which could cause a student to enter repayment on their federal student loans.

Student's Signature	Date	Advisor's Signature	Date
Assistant Dean's Signature	Date		

## **RETURN THIS COMPLETED FORM TO THE REGISTRAR'S OFFICE**

OFFICE USE ONLY

Date Entered