Leave of Absence

Students who are regularly admitted to the Seminary Masters degree programs are expected to be enrolled, at least on a part-time basis, in each quarter of the regular academic year in order to maintain steady progress toward the completion of their degrees. In the event that a student believes that such progress must be temporarily interrupted, and that it is not possible to enroll as a part-time student in a regular academic term (Fall, Winter and Spring Quarters) the student must submit to the Registrar a completed **Request for Leave of Absence** form. The form must be submitted before the beginning of the term for which the leave is requested, and must indicate the reasons for the request and the duration of the leave. A student may request a leave of no less than one term, and no more than two consecutive terms. Upon approval of the leave, the student shall be entered into the Northern Seminary records and registration system as being on leave of absence. This entry will maintain the student status of each individual on leave. However, students on leave of absence do not qualify for deferment of their student loans.

**Leave of Absence Fee = $50**

Each student on an approved leave of absence will be charged a fee of $50 per term towards maintenance of their student status. This fee will cover the same activities generally covered by the registration fee and the technology fee, and will guarantee the student access to campus resources such as the library, computer lab, advising time, etc., during the approved leave of absence.

Any questions regarding Leave of Absence should be directed to the Office of the Registrar.

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**Name & ID#:**

**DATE:**

**Requesting Leave For:** FALL  WINTER  SPRING  **Year(s):**

(Circle all that apply)

**Reason(s) for Requesting Leave of Absence** (Please give as much information as possible. You may an additional sheet or letter if needed):

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Student’s Signature:

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-Items below this line are for office use only-

**APPROVED**  /  **NOT APPROVED**

**Reason:**

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**Registrar’s Signature:**

**Date:**

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