

Fax: 701-858-4286

LEAVE OF ABSENCE

A leave of absence is available if you are completing coursework (excluding thesis, project, and capstone courses) and plan to be inactive for a period not to exceed a full calendar year. Submission of this form provides a means for the Graduate School to track your progress and to term activate you after your period of absence, so you may register for the upcoming semester.

If you have begun the final requirement and have an in-progress grade ("X") you may apply for a leave of absence only in the case of extenuating circumstances. In such cases, a letter to the Associate Vice President of the Graduate School must accompany this form explaining the circumstances; this type of leave will be approved for one semester at a time.

Date// Month Day Year					
inot State ID#Graduate Program					
Legal Name:					
Last	First	Middle	Former (if applicable)		
Mailing Address:					
Street	Apt#	City	State	Zip Code	
Email:			Telephone:		
You are encouraged to use y	our Minot State email				
Reason for leave:					
Student signature (required	l) – I certify that all stater	nents in this applic	ation are complet	ed and true:	
Signature		D	ate		
After receiving Program Direc	tor approval, submit to:	_			
Minot Sate Graduate School Email: <u>graduate@MinotStateU.edu</u>		P	Program Director signature		