

Request for Leave of Absence

Personal information

Name _____ Student ID# _____
LAST (FAMILY) NAME FIRST NAME

Address _____

Telephone _____ Date entered _____
SEMESTER/YEAR

Non-Tufts Email _____

Filing date _____ Degree _____

Leave of Absence Details

Are you a foreign student? ___ No ___ Yes

Have you ever been granted a leave of absence? ___ No ___ Yes Date ___/___/___

Are you currently receiving federal or departmental financial aid? ___ No ___ Yes

Is this leave of absence related to the COVID-19 pandemic? ___ No ___ Yes

Date current leave of absence is to become effective ___/___/___ Date of return ___/___/___

Note: The maximum time granted for each leave/extension is one year.

Is this a personal leave of absence or a medical** leave of absence? _____

Leave of Absence Policy

A student in good academic standing may submit this form to the Registrar to request a *Leave of Absence* to take advantage of a professional opportunity or for medical or personal reasons. A leave of absence is granted for up to one year; *additional leaves may be requested*. Time spent on a leave of *will not* be counted toward the standard time limitations for degree completion.

Those who do not obtain a leave and fail to register for at least one and one-half credit in any given semester will no longer be considered a degree candidate. If the student wishes to resume candidacy, he/she must provide a request in writing to the Registrar for the Public Health and Professional Degree Programs. Time taken during this period will be counted toward the standard time limitations for degree completion.

****For a medical leave** the student should obtain a letter from his/her primary care physician or other treating physician recommending a leave of absence and submit it with this form or separately to the Registrar. This letter should indicate the reason for the leave and expected duration. A student granted a medical leave must obtain documentation from their treating physician at the end of their leave confirming fitness to return to their studies.

If requesting a leave after the start of a semester a student must meet with the PHPD Assistant Dean for Student Services and obtain their signature on this form.

Financial aid recipients are required to meet with a financial aid counselor to discuss the impact the LOA will have on their financial aid status and possible loan repayment requirements. Students are also strongly encouraged to meet with a representative in the Office of Student Advisory and Health Administration to discuss the Health Insurance Policy for Students on Leave of Absence.

Please review the full Leave of Absence policy in the Student Handbook, available at <https://publichealth.tufts.edu/current-students>

Reason for request: _____

Student

Assistant Dean

Office of Financial Aid

Program Director

Registrar

Date Processed: ___/___/___

Cc: SAHA, Advisor, International Affairs (if applicable)