

Texas State University Leave of Absence Form

Submit **one copy** of this form with **original signatures** to the office of The Graduate College to request a Leave of Absence. The completed form must be received by The Graduate College **before** the first day of class of the semester for which the Leave of Absence applies.

Student Name: _____ Student ID: _____

Program Name: _____ Date: _____

Permanent Email: _____ Degree: _____

Anticipated dates of Leave – From: _____ To: _____

Reason for Leave of Absence:

Are you an International Student? Yes No

***NOTE:** International Students must inform the International Office prior to requesting a Leave of Absence*

Please initial next to each item to certify the following information. All items must be initialed before a Leave of Absence can be granted.

_____ I have read and understood the Leave of Absence Policy found in The Graduate College Catalog.

_____ No support (faculty assistance, university resources, etc.) may be provided to me while on a Leave of Absence from Texas State.

_____ I am responsible for consulting with offices outside of The Graduate College (Financial Aid, health insurance, etc.) about the impact of not maintaining enrollment in my degree program.

_____ I agree to abide by the policy and submit any paperwork needed upon my re-entry to Texas State.

Student Signature

Dissertation/Thesis Chair(s) (if applicable)

Graduate Advisor

Department Chair

Dean or Associate Dean of The Graduate College