

APPLICATION FOR LEAVE OF ABSENCE/TOTAL WITHDRAWAL



OFFICE OF THE REGISTRAR

INSTRUCTIONS: Fill out all information and submit form to the Registrar's Office after all signatures have been obtained. *Date of final approval determines the date for refund calculation.* **Note: Leave of Absences are only approved on a semester basis with a maximum of 2 semesters approved at any one time.**

POLY ID# _____	Academic Department: _____	CURRENTLY REGISTERED? <input type="checkbox"/> YES <input type="checkbox"/> NO	INTERNATIONAL STUDENT? <input type="checkbox"/> YES <input type="checkbox"/> NO
_____	_____	<input type="checkbox"/> PART TIME	<input type="checkbox"/> UNDERGRADUATE
_____	_____	<input type="checkbox"/> FULL TIME	<input type="checkbox"/> GRADUATE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

<input type="checkbox"/> TOTAL WITHDRAWAL	EFFECTIVE DATE: _____	FIRST SEMESTER AT NYU-POLY: _____
	Semester Year	Semester Year
<input type="checkbox"/> LEAVE OF ABSENCE	RETURN DATE: _____	
	Semester Year	

REASONS FOR A LEAVE OF ABSENCE OR TOTAL WITHDRAWAL (Please CHECK and explain as fully as possible any reasons that apply)

Academic **Financial** **Work** **Transferring** (Specify school and major below) **Other** (Provide details below)

Medical/Bereavement (Dean of Student Affairs signature required): _____

_____ Date

LOA: I understand that I am required to notify the Office of Graduate Academics (Graduate Students)/Academic Advisement Center (Undergraduate Students) at least 30 days prior to my planned return from a Leave of Absence. If I fail to submit such notification, I will be deactivated and will be required to reapply to NYU-Poly. In addition, I understand that courses taken while away from NYU-Poly WILL NOT be accepted as transfer credits when I am reactivated or readmitted to NYU-Poly.

Total Withdrawal: I understand that I will be required to re-apply if I choose to continue my studies at a future date.

_____ Signature _____ Date

1. ACADEMIC MAJOR ADVISER APPROVAL (All Students)

Signature _____	Print Name _____	Date _____	Comments _____
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2. BERN DIBNER LIBRARY (All Students) OUTSTANDING LIBRARY MATERIAL? YES NO

Signature _____	Print Name _____	Date _____	Comments _____
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3. RESIDENCE LIFE/OTHMER RESIDENCE HALL (Residential Students Only)

Signature _____	Print Name _____	Date _____	Comments _____
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4. ACADEMIC ADVISEMENT CENTER (Undergraduate Students) or OFFICE OF GRADUATE ACADEMICS (Graduate Students)

Signature _____	Print Name _____	Date _____	Comments _____
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5. OFFICE OF INTERNATIONAL STUDENTS AND SCHOLARS (International Students only)

Signature _____	Print Name _____	Date _____	Comments _____
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6. OFFICE OF STUDENT FINANCIAL SERVICES (All Students)

Signature _____	Print Name _____	Date _____	Comments _____
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DO NOT WRITE BELOW THIS LINE 20110302

Withdrawal/Leave of Absence Posted? <input type="checkbox"/> YES <input type="checkbox"/> NO	Refund Granted? <input type="checkbox"/> YES <input type="checkbox"/> NO _____ Reason
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Signature _____	Print Name _____	Date _____	Signature _____	Print Name _____	Date _____
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