

**UNDERGRADUATE REQUEST
FOR PLANNED EDUCATIONAL LEAVE
OFFICE OF ADMISSIONS AND RECORDS (WH 290)**

FOR OFFICE USE ONLY

PLACE DATE STAMP HERE

University policy allows students to be out of attendance for one semester (not including Summer and Winter terms) and still maintain their continuing student status. To qualify for a planned educational leave, students must have an overall grade point average of 2.0; be in good academic standing; completed one semester of coursework at CSUDH, and must have not applied to graduate for the same term as the requested planned leave.

STUDENT ID: _____ PHONE NUMBER: _____

LAST NAME: _____ FIRST NAME: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____

A Planned Leave must be requested prior to the beginning of the term for which the leave is to begin.

Circle term and enter year (Minimum of 1 year, maximum of 2 years.):

Leave to begin: Fall / Spring _____ **Plan to Return:** Fall / Spring _____
Year Year

Is this an extension of an approved Planned Educational Leave? Yes / No (Circle)

Indicate a reason for the Planned Educational Leave Request:

- | | | |
|----------------------------------|--|---|
| <input type="checkbox"/> Work | <input type="checkbox"/> Military Service* | <input type="checkbox"/> Independent Study |
| <input type="checkbox"/> Travel | <input type="checkbox"/> Personal | <input type="checkbox"/> Attending another school |
| <input type="checkbox"/> Medical | <input type="checkbox"/> Financial | <input type="checkbox"/> Other |

*Please attach a copy of your deployment orders.

Please explain briefly how this leave will assist in clarifying your goals or relate to your educational objectives:

Did you receive financial aid at CSUDH? Yes / No (Circle)

If yes, you must clear with the Financial Aid Office before your leave can be approved.

Financial Aid Officer's Name

Financial Aid Officer's Signature

Date

I have read the provisions of the Planned Educational Leave Policy in the University Catalog and understand that non-compliance will result in forfeiture of the advantages of the planned leave.

Student Signature

Date

FOR OFFICE USE ONLY:

Approved

Denied

Returned Unprocessed

Reason:

Student Notified

Processed By:

Date Posted: