

*Office of the Registrar*

**LEAVE OF ABSENCE REQUEST FORM**

Ed.M. and C.A.S. Candidates

*\*Students: Before completing this application, please review the Leave of Absence policies in the HGSE Student Handbook. If you are in a Harvard sponsored Visa, please visit the HIO before completing this application.*

**Name:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **HUID:**  **Email:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Program:** Ed.M. C.A.S.

**Have you previously taken a Leave of Absence? □** Yes **□** No

If “Yes,” please list semester(s): **\_**­­­­­\_\_\_\_\_\_\_\_\_\_\_

**Requested Leave of Absence Period**

 *Students may be granted leave for a maximum of two semesters. Those seeking a leave beyond two semesters must apply for an*

*Extended Leave of Absence (see HGSE Student Handbook for more details, including the application process).*

 Fall 20\_\_\_ Spring 20\_\_\_ Expected Return Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Requested Fee Structure**

 Facilities *($250/semester; access to my.harvard and Harvard libraries)*  Active File *($125/semester; no access to my.harvard or libraries)*

**Reason for Requested Leave of Absence**

*(Please include anticipated consequences of the leave on your course of study.)*

\*Please check in with the Financial Aid Office to discuss any potential financial implications

 **Student Signature:**

**HIO Representative Signature:**

**Program Director Signature:**

Associate Dean for Degree Programs Signature Date

***OFFICE USE ONLY:***  Last Date of Attendance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Degree Clock Stopped  Degree Clock Not Stopped Approver Initials: Date: