



# MontanaTech Graduate School Leave of Absence Form

Name: \_\_\_\_\_ ID#: \_\_\_\_\_

Local Address & Phone \_\_\_\_\_

Degree Program: \_\_\_\_\_

Beginning term of the leave of absence (Semester & Year): \_\_\_\_\_

Term I plan to renew studies (Semester & Year): \_\_\_\_\_

Reason for request:

### Program Summary

Courses and other requirements completed to this date: (You may attach a copy of an up-to-date transcript.)

Courses and number of credits for which you are presently enrolled:

Coded By: \_\_\_\_\_  
Term Coded: \_\_\_\_\_

List all other requirements for your program, and give a timetable for completion of those requirements:

Location where I can be reached during my Leave of Absence:

Address \_\_\_\_\_ Phone#: \_\_\_\_\_  
\_\_\_\_\_

E-mail: \_\_\_\_\_

**Master's Degree:** I understand that all required program elements for the Master's degree (including non-degree and transfer work completed before the term I was admitted to the program) must be completed within 6 calendar years of commencing graduate course work at Montana Tech.

**Continuous Registration:**

Graduate student in degree programs must register for credits each Fall and Spring Semester. I understand that I am not required to be registered during an approved leave of absence, however, the continuous registration rule still applies upon my return.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved       Denied

Department Head's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved       Denied

Graduate Dean's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved       Denied

Coded By: \_\_\_\_\_  
Term Coded: \_\_\_\_\_