

SUNY Korea Leave of Absence Extension Petition Form



Student Information			
Name		Student ID	
Department		Phone Number	
E-mail Address		Emergency Phone Number	
Home Address			
Are you a Scholarship Recipient?	<input type="checkbox"/> Yes, I'm a (_____) Scholarship Recipient.		<input type="checkbox"/> No

Previous Leave of Absence Information			
Last Enrolled Term	20 (_____)	<input type="checkbox"/> Fall <input type="checkbox"/> Spring	
1st LoA Term	20 (_____)	<input type="checkbox"/> Fall <input type="checkbox"/> Spring	<input type="checkbox"/> Military <input type="checkbox"/> Financial <input type="checkbox"/> Medical <input type="checkbox"/> Academic difficulty <input type="checkbox"/> Others: _____
2nd LoA Term	20 (_____)	<input type="checkbox"/> Fall <input type="checkbox"/> Spring	<input type="checkbox"/> Military <input type="checkbox"/> Financial <input type="checkbox"/> Medical <input type="checkbox"/> Academic difficulty <input type="checkbox"/> Others: _____
3rd LoA Term	20 (_____)	<input type="checkbox"/> Fall <input type="checkbox"/> Spring	<input type="checkbox"/> Military <input type="checkbox"/> Financial <input type="checkbox"/> Medical <input type="checkbox"/> Academic difficulty <input type="checkbox"/> Others: _____
4th LoA Term	20 (_____)	<input type="checkbox"/> Fall <input type="checkbox"/> Spring	<input type="checkbox"/> Military <input type="checkbox"/> Financial <input type="checkbox"/> Medical <input type="checkbox"/> Academic difficulty <input type="checkbox"/> Others: _____

Extending Leave of Absence Information			
LoA Extension Term	20 (_____)	<input type="checkbox"/> Fall <input type="checkbox"/> Spring	Returning Term 20 (_____) <input type="checkbox"/> Fall <input type="checkbox"/> Spring

What is the main reason of extending Leave of Absence?

If students are not able to return to the university on the returning term written above, they must extend their leave by submitting another petition. Students are subject to be dismissed if they do not return to the university on the returning term written above without taking additional action.

Student Signature Required	Date
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Decision:

<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Tabled _____ <i>Confirmed By</i> <i>Date</i>	<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Tabled _____ <i>Confirmed By</i> <i>Date</i>
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