Leave of Absence Request

Student Name: GCU	J Student Number:
LOA Request Dates	
Start: [Mid-Course: Day After Last Date of Class Attendance] [End of Course: Day after Course End Date] Reason for Leave of Absence Request (complete for all	* Must post attendance on this exact date
_	
this form on time. By Signing below, I affirm the following:	
 My leave of absence cannot be for more than 60 da For Mid-Course, I must submit this request on or current course. For End of Course, I must submit this request on or I am allowed up to two 60 day LOAs within all documentation of extenuating circumstances that within that time period. If I received Title IV funds and do not return from the University for financial aid purposes and a lf I received Title IV funds and do not return from date of attendance to anticipated return date will loan repayment purposes. 	before my last date of attendance in my before the end date of my current course. ny 12-month period unless I can provide t would allow me to request a third LOA m my LOA, I will be considered withdrawn a refund calculation will be completed. my LOA, the number of days from my last
Student Signature.	Data

 ${\it NOTE: } \ {\it HANDWRITTEN SIGNATURE REQUIRED-TYPED/ELECTRONIC SIGNATURE NOT ACCEPTED }$

Please return this signed form to your GCU Student Services Advisor