OFFICE OF GRADUATE STUDIES
CENTRAL MICHIGAN UNIVERSITY

Leave of Absence

Graduate students are NOT required to complete this form when taking a leave of absence from a program. Instead, this form serves as a way to encourage communication between graduate students and advisors/programs and to clearly identify some important implications of a leave of absence.

Student Name:_____ ID#:_____

Email:_____ Phone:_____

Degree: ☐Graduate Certificate ☐Specialist
☐MA ☐MS ☐MM ☐MBA ☐MPA ☐MSA ☐MHA ☐MPH
☐AuD ☐EdD ☐PhD ☐DET ☐DPT ☐DHA

Option/Area of Concentration (if applicable):_____

# of Graduate Credit Hours completed at CMU:_____ Current Cumulative Graduate GPA:_____

Leave of Absence Details:

Leave of Absence Start Date:_____

Leave of Absence End Date (estimated):_____

Important Implications:

1. Graduate students that are away from CMU for three consecutive years must apply for readmission to a program in order to continue in the program. Returning students are not required to pay the application fee. When readmitted, the student must complete the program requirements outlined in the current bulletin.

2. Your continuous and ongoing access to student resources (e.g., remote access to library, data storage on servers, email access) associated with a CMICH global ID requires enrollment in at least one course per academic year. Reinstatement of access to these services commences upon reenrollment.

3. Graduate students are expected to complete coursework and all other requirements within the following time limitations:
   Graduate Certificate: 7 years
   Master's/Specialist's Degree: 7 years
   Doctoral Degree: 10 years
   An extension of time request must be approved in order to complete a degree beyond these time requirements. Extension of time requests are rarely granted and only considered if there are clearly extenuating circumstances.
   I understand that I must still complete my degree by: ☐ May ☐ August ☐ December Year:_____

4. Graduate students are responsible for any outstanding balance owed to the university, even during a leave of absence. Billing statement notifications will continue to be emailed to your CMU email account.

Student:_____
Signature Print Name Date

Advisor:_____
Signature Print Name Date

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