

School of Graduate Studies

School of Graduate Studies – Application for Leave of Absence

Student: complete this section

Student Name:

Student ID#:

Program:

Campus:

Length of Leave: 4 months 8 months 12 months

LOA Start Date:

Current sources of funding*: NSERC/SSHRC/CIHR Scholarship

GRA/GAA

Other

NSERC/SSHRC/CIHR Faculty Grant

GSTA/GSRA

* Leave of absence may impact some or all of these sources of funding

Reason for leave.

Plan for resumption of studies following leave.

Contact info:

Email (non UNB email):

Phone:

I will contact the School of Graduate Studies to re-register for the _____ term.

I hereby apply for a leave of absence from my graduate studies as set out above. I certify that during the period of the leave of absence, **I will not be functioning in any way as a graduate student (this includes all research/writing activity and completion of any incomplete courses from previous semesters) and understand that I will not be able to make use of University resources, either personnel or physical, in connection with my graduate studies.** (See Graduate Calendar on regulations for Leave of Absence).

Student's Signature

Date:

GAU: complete this section

- We hereby support this request as stated above and guarantee that a place will be available to the student when he/she returns at the end of the time indicated.
- We understand that **the student will not be functioning in any way as a graduate student** (this includes all research/writing activity and completion of any incomplete courses from previous semesters).
- Arrangements to revise or discontinue funding have been made, and communicated to Financial Services.

Proposed conditions pertaining to the return from leave.

Will the student's funding be affected by the leave? If so, how?

Plan for resumption of program.

Other comments.

Director of Graduate Studies' Approval

Date:

SGS use only

Final conditions pertaining to leave, funding, other comments.

School of Graduate Studies Approval

Date: