



Birmingham School of Law Leave of Absence Request Form

Student Name: \_\_\_\_\_ Student #: STU \_\_\_\_\_

Leave of Absence Start Date: \_\_\_\_\_ / \_\_\_\_\_ / 20\_\_\_\_\_

Leave of Absence Return Date: \_\_\_\_\_ / \_\_\_\_\_ / 20\_\_\_\_\_

Reason for Leave of Absence Request:

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If requesting a mid-term LOA, describe the circumstances that precluded you from submitting this form before the beginning of the term:

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By signing below, I affirm the following:

- My leave of absence cannot be for more than one (1) full term;
- For mid-term leave of absence request, I understand that my request must be submitted before the last scheduled class for the term;
- I understand that I am responsible for tuition and fees assessed according to the refund schedule in effect on the date my leave of absence request is received by the Registrar;
- Leave of absence requests for a full term must be submitted no later than the first scheduled class for the term;

- I understand that I will not receive a grade for any classes missed in my leave of absence and must retake any required courses;
- I am only allowed one (1) leave of absence period within any twelve (12) month period unless I can provide documentation of extenuating circumstances that would allow for one (1) additional leave of absence during the twelve (12) month period;
- I understand that taking a second leave of absence in a twelve (12) month period without approval from the Dean and/or Assistant Dean will result in losing my place in the program and I will have to apply to take classes again.

Student Signature: \_\_\_\_\_ STU \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / 20 \_\_\_\_\_

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For Official Use Only:

Date Received: \_\_\_\_\_ / \_\_\_\_\_ / 20 \_\_\_\_\_

Approved By: \_\_\_\_\_

Date Approved: \_\_\_\_\_ / \_\_\_\_\_ / 20 \_\_\_\_\_