LEAVE OF ABSENCE

I, ________________________________, a student in good standing in the Ph.D. program, request a leave of absence for the following quarters (to be no longer than a year):

I understand that this leave of absence assures my continuance as an admitted student in the program during its duration. It does not constitute a waiver of the time limit for completion of the degree. In order to be extended, a request for an extension must be submitted.

I have talked with my advisor, and have made the following plan for completing course work and removing any incompletes during this leave of absence:

<table>
<thead>
<tr>
<th>Course No.:</th>
<th>Instructor:</th>
<th>Quarter &amp; Year Taken:</th>
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Description of course work to be completed:

Deadline*:

Plan for completion:

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Description of course work to be completed:

Deadline*:

Plan for completion:

________________________________________

Student Signature: __________________________ Date: ________________

Term you plan to return to program: __________________________

Approvals:

Advisor: __________________________________________ Date: ________________

Program Director: __________________________________________ Date: ________________

* Deadline for removal of incomplete grades is negotiated with course instructor. Deadline is not to exceed one year, as set by University policy. An Incomplete grade becomes part of the permanent record after deadline expires.