

# GENESE0

## APPLICATION FOR LEAVE OF ABSENCE

**Return form to:**  
Enrollment Management  
SUNY Geneseo  
Doty Hall 312  
One College Circle  
Geneseo, NY 14454  
Phone: 585-245-5619  
Fax: 585-245-5005  
Email: enrollment@geneseo.edu

Name \_\_\_\_\_ G# \_\_\_\_\_  
(Last) (First) (M)

Campus Address \_\_\_\_\_ Permanent Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Date Last Attended Class \_\_\_\_\_ Effective Date of Leave \_\_\_\_\_

**Will you be returning to SUNY Geneseo?**

If "yes," semester/year you plan to return\* \_\_\_\_\_

\* If you plan to live on campus when you return from your Leave, contact Student Life, MacVitte College Union 319, 585-245-5851

If "no," are you attending another college during Leave? \_\_\_\_\_

**Are you a recipient of the Excelsior Scholarship?** A leave of absence may deem you ineligible for future Excelsior Scholarship funds. For clarification, please contact Office of Financial Aid, Erwin Hall 104, 585-245-5731.

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**Reason(s) for Leave** (please rank pertinent reasons in order of importance, 1, 2, etc.):

\_\_\_\_\_ Attending another college during Leave to complete graduation requirement(s)\* (College: \_\_\_\_\_)

\* Required Approval form(s) must be completed. Contact Academic Advising office, Erwin Hall 106, 585-245-5541.

\*If you have applied to graduate and your graduation date is changing, and/or you are completing your final degree requirement(s) while on this Leave, see Graduation Records, Erwin Hall 106C, 585-245-5543.

\_\_\_\_\_ Attending another college during Leave\* (College: \_\_\_\_\_)

\* Required Approval form(s) must be completed. Contact Academic Advising office, Erwin Hall 106, 585-245-5541.

\* If you are eligible for financial aid and wish to use your financial aid while on Leave of Absence, you must contact Office of Financial Aid, Erwin Hall 104, 585-245-5731.

\_\_\_\_\_ Studying abroad. Will you be studying abroad under the sponsorship of a non-SUNY institution during your Leave? \_\_\_\_\_ If "Yes," college: \_\_\_\_\_\*

\*Required Approval form(s) must be completed. See Study Abroad office, Erwin Hall 217, 585-245-5546.

\_\_\_\_\_ Preference for a different academic experience \_\_\_\_\_

\_\_\_\_\_ Financial problem(s) \_\_\_\_\_

\_\_\_\_\_ Dissatisfaction with current academic performance \_\_\_\_\_

\_\_\_\_\_ Physical health problem(s) \_\_\_\_\_

\_\_\_\_\_ Dissatisfaction with relationship(s) with College Staff \_\_\_\_\_

\_\_\_\_\_ Emotional problem(s) \_\_\_\_\_

\_\_\_\_\_ Family factors (illness, marriage, relationship difficulties) \_\_\_\_\_

\_\_\_\_\_ Other (please specify) \_\_\_\_\_

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### **Important Information:**

- Without special authorization, students taking a Leave of Absence after the established withdrawal deadline will receive E grades.
- An Academic Dismissal will void a Leave of Absence.
- If you receive financial aid, please be aware that certain laws may affect your aid, resulting in a financial liability to SUNY Geneseo. Federal law mandates how a school must compute the amount of federal financial aid a student earns if he/she withdraws (officially or unofficially), takes a leave of absence, drops out of school, or is dismissed prior to completing more than 60% of the semester. Specifically, the amount of federal financial aid that the student earns is based on the percentage of the semester completed. All unearned federal financial aid must be returned, while the semester's expenses may not change. Careful consideration should be given to the financial ramifications of separating from the college prior to completing 60% of the semester. Additional information regarding this policy is available from the Office of Student Accounts (Erwin Hall 103, 585-245-5621), and you are encouraged to consult with them and the Office of Financial Aid (Erwin Hall 104, 585-245-5731) prior to reaching a decision.

**I have read the policies pertaining to taking a Leave of Absence and understand those provisions. If I do not return from this Leave of Absence as specified above and am not granted an extension of this Leave, I hereby acknowledge that I will be Administratively Withdrawn from SUNY Geneseo.**

Signature \_\_\_\_\_

Date \_\_\_\_\_