

University of Montana Graduate School Leave of Absence Form

Name:

ID (790#):

Email:

Major:

Degree:

Term (Semester & Year):

Beginning of Leave:

Returning from Leave:

Reason: Please check if it is due to you or a family member entering active duty military service. (explain below)

Program Summary

I have attached an up-to-date transcript

Are you currently enrolled?

Yes

No

List all other requirements for your program, and give a timetable for completion of those requirements:

Student Signature

Date

Approved

Denied

Department Chair/Dean Signature

Date

Approved

Denied

Graduate Dean Signature

Date