



Leave of Absence and Exit Form

I am requesting a leave of absence*

I am withdrawing from Sterling

Name: _____ Date Submitted: _____

Reason(s) for leaving Sterling:

Family Concerns

Financial

Not meeting my needs:
Academic

Not meeting my needs:
Community

Not meeting my needs:
Work

Personal Health

Not meeting my needs:
Other _____

Are you:

transferring to another institution? (Name: _____)

accepting a work or other non-academic opportunity?

*Students granted a leave of absence may resume their studies without reapplying, provided they are absent for a period of less than one calendar year. *Students on leave will be removed from the students@sterlingcollege.edu group and added to the loastudents@sterlingcollege.edu group. Students who withdraw or allow their leave of absence to expire will lose access to their @sterlingcollege.edu email address.*

Do you plan to return to Sterling?

Yes (Expected date of return _____)

No

How can you be reached while on leave

Email: _____

Telephone: _____

Advisor Signature

Date

Financial Aid Signature

Date

Business Office Signature

Date

Library Signature

Date

Dean of Community Signature

Date

Dean of Academics Signature

Date

Work Program Signature

Date

.....**Return to Registrar's Office**.....

Registrar Signature

Date

Last semester enrolled _____

Cumulative Q.P.A. _____

Total Credits Earned _____