



NEW ENGLAND COLLEGE *of* BUSINESS

Petition for Leave of Absence

Action by Student: Complete this form down to the dotted line. The request must explain in adequate detail why the leave is being requested. The request must contain:

- 1) the last date of attendance or the anticipated last date of attendance; and
- 2) the anticipated date of return; and
- 3) must be signed and dated.

Student Name (please print)

Address: _____

Phone: Day: _____
Evening: _____
E-Mail: _____

I am requesting: ____ Leave of Absence
Program: _____

Last Date of Attendance _____

Expected Term of Return _____ (*can be no longer than 1 semester (2 -8 week modes) at the undergraduate level and no longer than 1 semester (4 – 5 week modes) at the graduate level.)

My reason(s) for this Leave of Absence request is:

By signing this document, I acknowledge that I am applying for a Leave of Absence from the New England College of Business and understand that the leave I am requesting is not approved until the Registrar's Office has signed this form. Upon return from the Leave, I am responsible for dropping any future courses that are scheduled (following the college's course drop policy) or registering for any future courses. I understand that if I am receiving Title IV funding that I must speak with the college's financial aid department to be counseled on any possible financial aid implications of the Leave of Absence. I understand that Satisfactory Academic Progress will be measured on a standard semester basis if the approved Leave of Absence is taken during a semester. I understand that if I do not return within the requested timeframe that I will be administratively withdrawn from the college.

Student Signature: _____ Date: _____

Please return to the Registrar via email at: registrar@necb.edu or via facsimile at: 877-469-6961

Action by Registrar: Approved Y N If approved, change student status to Leave of Absence. Place copy in student file

Registrar Signature: _____ Date: _____