APPLICATION FOR A
PERSONAL LEAVE OF ABSENCE
Grinnell College

Date: _____ Semester(s) requested for leave: _____

Name of Student: _____ User Name: _____

Campus P. O. Box: _____ Home Phone: _____

Permanent Address: _____

_____

Mailing Address while on leave if different from above:

_____

_____

Faculty Adviser: _____

Please attach typed responses to the following questions:

1. Why do you want to take a semester off?
2. Have you discussed this decision with your family? What do they think?
3. How does this leave fit into your overall four-year planning?
4. Have you discussed this decision with your adviser? What does your adviser think of your plan?
5. Are you planning on taking classes while on a personal leave? If yes, how many credits?
6. Have you met with a staff member in Financial Aid to discuss the implications of your leave of absence? Have you shared this information with your family?

I have read the Student Handbook and understand the policies pertaining to a Personal Leave of Absence from Grinnell College, and I submit this application with full awareness of my decision. [Some students choose to wait to sign this part of the application until after they meet with the Associate Dean and Director of Academic Advising.]

_____ _____
Student Signature Date

Return completed application to: Associate Dean and Director of Academic Advising,
Office of Student Affairs, Forum Lower Level.

Deadline: Applications are due by the end of the semester prior to the requested leave of absence. This deadline also must include time for an in-person interview. Please call x3702 to schedule an interview with the Associate Dean and Director of Academic Advising.