



EASTERN MEDITERRANEAN UNIVERSITY

Application Form for Leave of Absence (Undergraduate Students)

A student who has a valid excuse that causes the suspension of activities associated with the coursework may appeal for a leave of absence. The period for leave of absence is limited to 4 academic semesters (at most 2 semesters at a time) during a course of study for a degree. In appeals made after five weeks of the commencement of classes, an officially dated Medical Council Report stating a medical problem of the student, or any evidence, which supports and proves a compelling private excuse such as death or serious illness in the immediate family, should be provided. (Education and Exam Regulations, Article 29)

This application form must be filled and signed by the student since application by proxy is not acceptable. All documentation, if any, supporting the request/application should also be attached, for a leave of absence to be considered. Incomplete application forms will be returned to the Department.

Part I. Student Information [To be completed by the Student]

Student No							Period of Leave						
							Duration		Semester 1		Semester 2		
Student's Name							<input type="checkbox"/> 1 semester	200 <input type="checkbox"/> / 200 <input type="checkbox"/>	200 <input type="checkbox"/> / 200 <input type="checkbox"/>				
Department							<input type="checkbox"/> 2 semesters	Fall <input type="checkbox"/> Spring <input type="checkbox"/>	Fall <input type="checkbox"/> Spring <input type="checkbox"/>				
Contact Address							Telephone Area Code+Phone #						
Reason for Leave of Absence <i>May be written in English or Turkish. Please use a separate page if needed and attach the relevant documents, if any.</i>													
Attached Documents, if any	1							Student's Signature					
	2							Date of Application			Day	Month	Year

Part II. Additional Information [To be completed by the Academic Advisor]

Leave of absence in the previous semesters, if any													
	Academic Year			Semester				Academic Year			Semester		
1	<input type="text"/> / <input type="text"/>			<input type="checkbox"/> Fall <input type="checkbox"/> Spring			3	<input type="text"/> / <input type="text"/>			<input type="checkbox"/> Fall <input type="checkbox"/> Spring		
2	<input type="text"/> / <input type="text"/>			<input type="checkbox"/> Fall <input type="checkbox"/> Spring			4	<input type="text"/> / <input type="text"/>			<input type="checkbox"/> Fall <input type="checkbox"/> Spring		
GPA in the Last Semester	<input type="text"/> . <input type="text"/>			CGPA	<input type="text"/> . <input type="text"/>			Applied before the end of the 5th week?			<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Academic Advisor Title and Name							Signature			Date			

Part III. Consent of the Department Chair

Notes							Evaluation Result	<input type="checkbox"/> Recommended		<input type="checkbox"/> Not Recommended		
Department Chair Title and Name							Signature			Date		

Part IV. Decision of the Faculty/School Board

No need for the Faculty/School Board meeting if the Dean/Director has been given the approval authority by the Board.

Board Meeting Date				Meeting & Decision Numbers				Evaluation Result	<input type="checkbox"/> Approved		<input type="checkbox"/> Not Approved	
Dean / Director Title and Name							Signature			Date		

Part V. Outstanding Debt [To be completed by the Financial Affairs Office]

Outstanding Debt						Semester Payment									
US \$				TL				US \$				TL			
Director's Name						Signature			Date						

Part VI. Approval of the Vice-Rector for Student Affairs

Notes							Evaluation Result	<input type="checkbox"/> Approved		<input type="checkbox"/> Not Approved		
Vice-Rector Title and Name							Signature			Date		

One approved copy of this form should be sent to:

- the Institute of the Graduate Studies and Research
 - the Registrar's Office
 - the Financial Affairs Office
 - the EMU Dormitories
- by the Office of the Vice-Rector.