

**UNIVERSITY OF DALLAS
REQUEST FOR LEAVE OF ABSENCE**

Fill out this form and return to the Office of the Registrar.

Student Name

Date

Student Signature

Semester Planning to Return

Student ID #

Permanent Address

Reasons:

City State Zip

Phone

Dean of the College

() Please check if receiving Financial Aid *Note: Attending another institution while on leave may affect any scholarship or financial aid.*

Office Use:

LA Coded: _____
Date

Initials

Revised 8/21