

## LEAVE OF ABSENCE / CONTINUOUS ENROLLMENT REGISTRATION FORM

Semester	Year
□ Fall	
□ Spring	
☐ Summer	

GWid	LAST NAME	FIRST NAME	EMAIL ADDRESS	
SCHOOL	STUDENTLEVEL	STUDENT MAJOR/DEGREE	REQUESTED REGISTRATION STATUS	
	☐ UNDERGRADUATE ☐ GRADUATE ☐ LAW ☐ MEDICINE		☐ LEAVE OF ABSENCE ☐ CONTINUOUS ENROLLMENT	
Continuous Enrollment Status				
appropriately registered for activities such as the program; attendance at another institution wit grade of Incomplete or In Progress was received	ne following, with the prior approval of the schoo h prior approval to have work transferred back to	when registered for continuous enrollment and I in which the student is enrolled: cooperative wo the GW program; completion of outstanding wo the particular school. This status is generally limi	rk semester; study abroad rk in courses inwhich a	
LeaveofAbsence				
generally limited to one calendar year. A degre granted a leave who does not return to active s	e student who discontinues active enrollment in	is or her advising office for a leave of absence for degree studies without being granted a leave of nce, must apply for readmission and be subject t we is in effect.	absence, or a student	
If being granted a leave of absence, it is for t (please indicate only one):	he following reason		ntinuous enrollment status, it is for the lease indicate only one):	
☐ Receive mental health/medical assistance	☐ Federal Government Foreign Aid Service (e.g., Peace Corps)	e □ Internship		
		☐ Temporary enroll	<ul><li>☐ Temporary enrollment at another institution</li><li>☐ Study Abroad</li></ul>	
☐ Fulfill family responsibilities	☐ Official Church Mission	_ ,		
☐ Paid work for financial reasons	Other:	_ ☐ Completion of p	rior Incomplete coursework	
<ul> <li>Military Service/Called to Active Duty (do not include students already on active duty who are transferred to another posting)</li> </ul>		☐ Other:		

All other registered coursework for the semester will be dropped.

STUDENT	
I verify the registration request and that I amoustanding balance.	still responsible for any
Signature:	_Today'sDate:

AUTHORIZED SCHOOL OFFICIAL		
□ Priorto start of the semester	OR	Effective Date://
Signature:		Today's Date: