Eligibility for a Leave of Absence (LOA)
Undergraduate students or students seeking a 2nd degree in good academic standing at Chico State and in attendance as a regular student beyond the fourth week of the previous semester are eligible to request a leave. Students that have applied for a graduation term during the requested leave will be withdrawn from graduation or must reapply for a graduation term for the requested semester of return marked below or a later semester.

Benefits
Approval of your leave request grants you the right to continue under the catalog rights in effect at the time you left the university. Upon your return from an approved leave you will not be required to complete a university admissions application.

Limitations
A leave may be granted for a maximum of two consecutive semesters excluding summer. Under limited educational circumstances, a leave may be extended for up to two additional semesters for a maximum leave of 2 years in accordance with Title 5 regulations in order to maintain your catalog rights. If you do not return for your approved term, you will lose eligibility to enroll, your catalog rights, and will need to apply for admission when you wish to return to Chico State. All requests are subject to approval and do not guarantee re-enrollment in impacted programs.

Deadline
Request must be received in the Office of the Registrar no later than the Friday of the fourth week of the semester of absence. All classes for the current and future semesters must be dropped before this request can be approved.

The following Student Groups must notify the offices below before submitting this request:
- University Housing & Food Service resident students: If you reside in a University Housing community (i.e., a residence hall or University Village) you must contact your building Residential Life staff to be checked out of your room and to return all keys issued to you prior to your departure. Failure to do so will result in additional University Housing fees as stipulated in the License Agreement. (530) 898-6325

Select one:
- ☐ Request a new Leave of Absence
- ☐ Change semester of return on existing Leave of Absence

Semester last enrolled at Chico State: FALL 20____ SPRING 20____ SUMMER 20____
Semester of return to Chico State: FALL 20____ SPRING 20____ SUMMER 20____

You are responsible for dropping your classes.
Any fee and tuition charges on your account will be adjusted per the Student Financial Services Refund Policy.

Reason you are requesting a leave of absence: ☐ Medical ☐ Transfer ☐ Other ____________________________

Student Name (Print) __________________________ Chico State ID Number ____________________________
Phone Number during leave (____)________

Student Signature __________________________ Date __________________________

All communication regarding the status of this request will be sent to your Chico State email account.

OFFICE USE ONLY: