

MILITARY SERVICE LEAVE OF ABSENCE REQUEST

RMRULARC

OFFICE OF THE REGISTRAR

901 12th Avenue P.O. Box 222000 Seattle, WA 98122-1090 (206) 220-8030; Fax: (206) 296-2443 Email: registrar@seattleu.edu

~ Print in Ink ~

PURPOSE:

This military leave of absence from Seattle University is granted to a student who is called up for active military service in any branch of the United States armed forces. It does not apply to students ordered to active military duty in another country's armed forces.

This leave of absence will be in effect for no longer than three years. The date listed below in *Date Leave is to Begin* will be considered the official start date of the leave of absence. Upon official notification by the student to the Office of the Registrar within thirty day of release that the military service has ended, the student may return to the University without the need for readmission.

As per policy 94-1, Military Call to Active Duty, the student has two options from which to choose:

- (1) completely withdraw from his/her classes without penalty and receive (a) 100% tuition refund, (b) 100% course fees refund, (c) 100% of the unused portion of any pre-paid meal card, and (d) pro-rated residence hall charges based on the day on which the student withdraws; or
- (2) with permission of the instructor of each class and the dean of his/her school, to have all "I" grades assigned with no tuition or course fees reimbursement and coursework to be completed at a later date according to the agreement arranged with the instructor and dean.

Financial aid and payments received by the student for the term will be refunded to the source. Students who have received a refund from financial aid sources will be expected to repay the financial aid according to the terms of any promissory notes they have signed. The same standards that are applied to any students who have an outstanding tuition balance with the University will be applied to those called up for military duty.

INSTRUCTIONS:

Attach a copy of your military call-up orders.

Submit this completed form to the Office of the Registrar.

'	9		
Seattle U ID:		Phone Number	,———
			Area Code
Student Legal Name:		SU Email:	@seattleu.edu
Last	First	Middle	
Current Term/Year (Fill in year): Fall			
Do you receive VA benefits? ☐ Yes ☐ No	Are yo	ou currently living in residential housing?	□ Yes □ No
Do you give permission for our office to for		Ministry for prayer and support services? like to be contacted by Campus Ministry?	
Mailing Address (while away):			
NUN	MBER/STREET		APT. NUMBER
CITY	Υ	STATE	ZIP
Date Leave is to Begin (MM/DD/YY):			
Select one option: □ I choose to completely withdraw fr	rom my courses at this time.		
□ I choose to have "I" grades assign	ed and complete my coursew	ork at a later date. Dean's signature requi	red for this option.

With the submission of this form and the attached documentation, I hereby request a military leave of absence from Seattle University. I understand that this leave will be in effect according to the timelines described in Policy 94-1, Military Call to Active Duty.

▶ Dean or Associate Dean Signature: ______

 Date:
REGISTRAR'S OFFICE USE ONLY
Processed by: ———————————————————————————————————

Date:

➤ Student Signature: ___