

BGS Leave of Absence Request Form

Before completing this form, please refer to the Leave of Absence Policy. Students are encouraged to discuss the leave with their Graduate Group Chair.

Note: [Leaves of Absence for a Family Leave \(Birth or Adoption of a Child\)](#) are handled through the Graduate Student Center through [this form](#).

Name of Student: _____

Graduate Group (and Program, if in CAMB or GGEB): _____

Year of PhD Training: _____

Dissertation Mentor (if applicable): _____

If Post-Candidacy, Date of Last Thesis Committee Meeting: _____

Reason for Leave:

Medical* _____

Personal _____

Military _____

*If medical, do not specify details on this form

Leave Start Date (Last Day Attending Class or Working in Lab): _____

Proposed Return Date: _____

Other Comments: _____

Student Signature: _____ Date: _____

If Leave is approved by the graduate group,

Graduate Group Chair Signature: _____ Date: _____

The Graduate Group Chair should submit the completed form to the BGS Administrative Director. Once the leave is approved by BGS, a letter will be sent to the student confirming the leave details and conditions for return from leave.