

FISHER COLLEGE
RETURN FROM A PERSONAL LEAVE OF ABSENCE FORM

Date Request for Return Submitted: _____

Student Name: _____ Student ID: _____

Mailing Address: _____ Permanent Address: _____

Current Phone: _____ Phone During Leave: _____

Email Address: _____

Semester(s) for which Leave of Absence was Approved: _____ Semester of Return: _____

Do you want to live in a Fisher College dormitory? ____ Yes ____ No *(If Yes, please contact housing at 617-236-5423 to request instructions on how to petition to live in Fisher College housing.)*

Do you receive Financial Aid? ____ Yes ____ No *(If Yes, you are responsible for adhering to all application deadlines including filing your FAFSA. You may contact a financial aid counselor at 617-236-4570 if you have any questions.)*

Are you a United States Citizen? ____ Yes ____ No *(If No, please contact the International Student Advisor.)*

Please note: If you were on Academic Probation when your Leave of Absence was approved, you will return on Probation. All letters, forms and documents will be held confidentially.

For Office Use Only – do not write in this space

Academic Standing: ____ Good ____ Academic Probation ____ Disciplinary Action

Dean's approval signature: _____ Date: _____

Distribution (please check all that apply): ____ Registrar ____ Bursar ____ Financial Aid ____ Housing