

**Graduate Student
Request for Temporary Withdraw**

I, _____(first and last name), would like to request a temporary leave of absence from the Graduate Programs in Counseling (GPC) for the _____ (enter semester/s and year/s desired; you may request up to two consecutive semesters of leave). I plan to resume coursework in the _____ (enter semester and year desired).

The reason/s for the request is/are (check all that apply):

- Personal/professional
- Financial
- Medical
- Military service
- No needed courses are offered
- Other (please specify):_____

During my leave of absence, I may be contacted at the following address, phone number/s, and e-mail/s:

Address: _____

Phone: (____) _____ and/or (____) _____

E-mail: _____ and/or _____

I understand that the leave of absence is normally limited to 1 year. Students with an absence of one year without an approved leave of absence, or who extend leave beyond one year, will be governed by new departmental/program guidelines upon their return to the program. Further, I understand that I am expected to remain in touch with the administrators of the GPC program throughout my leave for advising purposes.

Students seeking approval for a leave of absence from the GPC must complete this form and submit it to ALL of the following individuals (either via e-mail or snail mail):

1. Dr. Michael Morrow, Director of GPC
morrowm@arcadia.edu
(267) 620-4765
Psychology Department, Boyer Hall 124
2. Ms. Carol Lyman, Associate Director of GPC
lymanc@arcadia.edu
(215) 572-4693
Psychology Department, Boyer Hall 121
3. Ms. Mary Kate McNulty, Associate Dean, Graduate Studies
mcnulty@arcadia.edu
(215) 572-2877
Taylor Hall, Room 105

Student signature
Revised 2018 Oct.

Today's date