Leave of Absence/Withdrawal Form

Name: ___________________________  ___________________________  ___________________________
       Last                        First                        Middle Initial

RUID: ___________________________  Date: ___________________________

E-mail address: ___________________________  Class (Month/Year): ___________________________

I wish to leave Rutgers University in the ___________/ ___________ semester for the following reasons:

☐ Personal   ☐ Financial   ☐ Medical   ☐ Other

Please explain briefly. Your comments will remain confidential.

☐ Leave of Absence
   I plan to leave Rutgers University temporarily (for 1 to 4 semesters only). I am in good academic standing
   and I plan to return to Rutgers in the ___________/ ___________ semester.
   (Semester)   (Year)

☐ Withdrawal
   I plan to leave Rutgers University and do not plan to return. If I decide to return to Rutgers University,
   I understand that I will need to re-apply through Undergraduate Admissions.

Student Statement of Responsibility

I am aware that it is my responsibility to contact the student service offices listed below, as applicable to my situation. I have
indicated the offices I need to contact by placing a check next to them.

☐ Educational Opportunity Fund (EOF)
☐ Housing Office
☐ Honors Program
☐ Dining Services – Cancel meal plan
☐ Financial Aid
☐ International students must contact International Student Advisor to handle legal status matters.
   A financial aid exit interview is legally required if you are currently receiving aid or you have received aid at any time.
☐ Center for Global Services.

I understand that if I fail to contact these offices, I will have continued charges to my account.

Signature of Student ___________________________  Date ___________________________

RBS Office of Undergraduate Programs ___________________________  Date ___________________________

☐ Reenrollment form submitted