

## SCIENCE GRADUATE STUDIES COMMITTEE APPLICATION FOR TEMPORARY LEAVE OF ABSENCE

Student name / UPEI ID  Supervisor / Co-Supervisors  Base Department  First semester of enrollment  Last semester of enrollment				
Reasons that motivate the request for	or a temporary leave (attach docur	ments if necessa	ary):	
If approved,	_			
The student will NOT be registered during the following semester(s):		Fall 20	Winter 20	Spring 20
The student expect to RETURN to the program during the following semester:		Fall 20	Winter 20	Spring 20
Address where the student can be reached while on leave (include phone number and email):				
Please note: This form is the first step in requesting temporary leave of absence. The next step is to complete the UPEI "Leave of Absence Application" form, which can be found on myUPEI (under UPEI forms). While completing the UPEI leave application form, you will be prompted to attach written approval from the Graduate Program Coordinator of your Faculty, which is documented in this form.				
Signatures and dates:				
Student:				
Supervisor (Co-Supervisors):				
Base Department Chair:				
Graduate Studies Coordinator:				