



Faculty of Graduate Studies
M.A. Counselling Psychology

Name:	ID#
Email:	Date

APPLICATION FOR LEAVE OF ABSENCE FORM

Under exceptional circumstances (e.g. medical, maternity) students may apply for a temporary leave of absence from the program.

- Please note that a leave of absence is granted on a term-by-term basis, therefore, complete a separate form for each term.
- *Students who require a leave are expected to do no academic work nor be engaged in full-time employment during their leave.*

Indicate One Term Only: ☐ Fall _____ ☐ Spring _____ ☐ Summer _____

Reason(s): _____

☐ Leave of Absence GRANTED ☐ Leave of Absence DENIED

Continuation Fee: ☐ I will pay the Continuation Fee as required
☐ I would like to apply for an exemption of the Continuation Fee

Indicate One Term Only: ☐ Fall _____ ☐ Spring _____ ☐ Summer _____
Reason(s): _____

☐ Exemption GRANTED ☐ Exemption DENIED

If you have received an exemption of the continuation fee, you are required to enroll in CPSY 000 (Leave of Absence) for each semester. If you have not been granted an exemption, you are required to enroll in CPSY 605 Continuation for each semester. Waiving of the required continuation fee is subject to the discretion of the CPSY Program Committee.

Student Signature: _____

Office Use Only

Director's Signature: _____ Office Coordinator's Signature: _____

Copies: ☐ Student ☐ CPSY Office ☐ Finances ☐ E.S.

May2008/AM6

