



Return to:
 Office of the Registrar
 Oregon State University, B102 Kerr Administration Building, Corvallis, OR 97331-2130
 T 541-737-4331 | F 541-737-8123 | registrars@oregonstate.edu | http://registrar.oregonstate.edu

Undergraduate Planned Educational Leave Program Petition (Page 2)

Optional Alternative Contract:

Students may authorize an alternate person to be contacted by the university during their absence.

Enrollment records Billing/Student accounts information Financial Aid Grades

Other (please specify): _____

Name: _____ Affiliation: _____

Mailing address: _____

City/State/Zip: _____ Telephone #: _____

Email address: _____

By signing below, I authorize the above named person as my alternate contact and I am requesting that Oregon State University release the above checked information to this person concerning my accounts if I am unable to be contacted until my designated return term. I am also authorizing the above named alternate person to contact the university and conduct business on my behalf.

Signature: _____ Date: _____

Required Recommendations and Signatures:

College Head Advisor:

Reviewed with student: Yes No

Comments: _____

Signature: _____ Date: _____

Office of Student Conduct:

Approve Disapprove

Signature: _____ Date: _____

Student Statement:

By signing below, I am confirming that I have read Academic Regulation 13d, I understand the terms and conditions, and I understand that if my absence exceeds the maximum time I will no longer be under this policy and that I will have to file for readmission to the university.

Signature: _____ Date: _____

Military Students:

You are eligible for more than one planned leave of absence. All military personnel who are deployed for military service may submit a voluntary leave request for each deployment. Students who are deployed for military service will not be charged the \$25 application fee. Please attach a copy of your deployment orders to this petition.

Registrar's Office Official Use Only:

Date received: _____ Academic & conduct standing: _____

Petition: Approved Denied – Reason: _____

Signature: _____ Date: _____