

Carnegie Mellon UNIVERSITY REGISTRAR'S OFFICE

UNIVERSITY REGISTRAR'S OFFICE

Lower Level, Warner Hall, A19
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university-registrars-office@andrew.cmu.edu
<http://www.cmu.edu/hub>

Read the policy on the reverse prior to completing this form. Complete and submit this form to your department or college **at least 30 days prior** to the start of the semester in which you plan to return. Your department or college must complete and return this form to the University Registrar's Office. Allow adequate processing time. **Federal law mandates students on F1 or J1 Visa contact the Office of International Education prior to returning from a leave of absence.**

Petition to Return from Leave of Absence

STUDENT INFORMATION

Student Andrew ID: _____ - OR - Student Card ID Number: _____

Student Name: _____
Last First MI

Permanent Address: _____ Current Address: _____

Telephone Number: _____ Current E-Mail Address: _____

Home College: _____ Department: _____ Class Level: _____

Semester of Return (*circle one*): Fall Spring Summer-1/All Summer-2 20 _____

REQUIREMENTS GOVERNING RETURN

REQUIRED INFORMATION AND SIGNATURES

Student's Signature: _____ Date: _____

Advisor's Signature: _____ Date: _____
Print/Sign

Dept. Head's Signature: _____ Date: _____
Graduate Students Only Print/Sign

Associate Dean's Signature: _____ Date: _____
Undergraduate Students Only Print/Sign

URO USE ONLY

Semester _____ Current Enrollment Status _____ New Enrollment Status _____ Initials/Date _____