

Adler University

*****MEDICAL LEAVE OF ABSENCE REQUEST*****

**Electronic Form
CHICAGO CAMPUS**

PLEASE REVIEW

THERE ARE SPECIFIC REQUIREMENTS THAT MUST BE MET IN ORDER TO TAKE A MEDICAL LEAVE OF ABSENCE

MEDICAL LEAVE OF ABSENCE POLICY

A student who cannot begin or complete a term due to illness or other health related conditions may submit a request for a medical leave of absence.

Students must submit the Medical Leave of Absence form and provide documentation on official letterhead from their health care provider supporting their request for a medical leave of absence and the anticipated timeframe in which the student is able to resume coursework. The medical leave documentation from the health care provider does not have to indicate the student's specific health condition.

Students may take a medical leave of absence for up to one year. Requests to extend a medical leave must be recommended by the student's health care provider. Documentation recommending the extension must be submitted from the student's health care provider on official letterhead. A student returning from a medical leave of absence must provide documentation on official letterhead from their health care provider once their condition has been resolved or managed and the student is able to resume their studies.

Students are strongly encouraged to log onto Student Planner or WebAdvisor and drop all courses if they decide to take a medical leave of absence before the term starts or during the add/drop period. When a medical leave of absence is granted, withdraw (W) grades will be posted for courses that have not concluded but remain on the student's schedule for that term. Students may elect to petition for incomplete grades. If the petition is granted the student must sign an incomplete grade agreement and complete all coursework in accordance with the incomplete grade agreement. If a student has incomplete grades from prior terms, the deadline for completing the course is not changed by a leave of absence.

While a leave of absence for medical reasons may be granted at any time during the term, tuition is refunded in accordance with the University's refund policy. Please see your campus's Tuition Refund Policy in the most recent University catalog.

Students taking a medical leave of absence who are recipients of US Title IV financial aid should refer to the US Financial Aid portion of the most recent catalog to determine the financial implications of their leave. A medical leave of absence may result in the partial or complete loss of financial aid for the term. Questions about individual cases should be directed to the Office of Financial Aid.

Students who stop attending classes without formally submitting a medical leave of absence request risk academic and financial consequences. Academic consequences include but are not limited to receiving failing grades in all courses, being placed on academic probation, and academic dismissal. Financial consequences include but are not limited to incurring a balance which impacts the ability to register and financial aid eligibility being suspended.

IMPORTANT INFORMATION:

1. If you did not download this form directly from the Registrar page on Adler Connect, you may obtain the most recent form from the Registrar page on Adler connect at <https://connect.adler.edu/studentservices/registrar>. Older versions of this form will not be processed.
2. ***If you decide to take a medical LOA before the term starts or during the drop/add period, you are required to log onto Student Planner or WebAdvisor and drop all of your courses immediately. Failure to do so will result in charges of fees and/or tuition.
3. If you are completing the current term, your LOA request will not be processed until the term has concluded and all grades are posted. If you are taking a medical leave immediately, your medical LOA request will be processed once your last date of attendance in each course has been confirmed.
4. It is the student's responsibility to obtain all signatures listed below and make sure the completed form, with all signatures, is submitted to the Office of the Registrar. This request is not considered official until processed by the Office of the Registrar. Incomplete forms AND forms mailed, faxed, or dropped off will be returned to the student. Completed forms must be e-mailed to registrar@adler.edu.

STUDENT INSTRUCTIONS:

1. STUDENT SIGNS AND DATES FORM BELOW AND OBTAINS SIGNATURES IN THE ORDER LISTED BELOW.
2. ROUTE FORM VIA YOUR ADLER E-MAIL ACCOUNT. FORMS ROUTED VIA PERSONAL E-MAIL ACCOUNTS WILL NOT BE ACCEPTED.
3. STUDENT ROUTES THE FORM, VIA E-MAIL, TO THEIR FACULTY ADVISOR AND COLLECTS THEIR SIGNATURE.
4. AFTER OBTAINING THEIR FACULTY ADVISOR'S SIGNATURE, STUDENT ROUTES FORM, VIA E-MAIL, TO THEIR PROGRAM DIRECTOR OR PROGRAM CHAIR AND COLLECTS THEIR SIGNATURE.
5. AFTER OBTAINING THEIR PROGRAM DIRECTOR'S/CHAIR'S SIGNATURE, THE STUDENT ROUTES THE FORM, VIA E-MAIL, TO THEIR PROGRAM'S DIRECTOR OF TRAINING OR THE DIRECTOR OF COMMUNITY ENGAGEMENT. IF THE STUDENT IS NOT ON PRACTICUM OR SJP, THE STUDENT ROUTES THE FORM, VIA E-MAIL, TO STUDENT AFFAIRS.
6. AFTER OBTAINING STUDENT AFFAIRS' SIGNATURE, THE STUDENT ROUTES THE FORM, VIA E-MAIL, TO FINANCIAL AID.
7. AFTER OBTAINING FINANCIAL AID'S SIGNATURE, THE STUDENT ROUTES THE FORM, VIA E-MAIL, TO THE OFFICE OF THE REGISTRAR.
8. SUBMIT ONE FORM WITH ALL SIGNATURES TO REGISTRAR@ADLER.EDU. FORMS WITH MISSING SIGNATURES WILL NOT BE ACCEPTED BY THE OFFICE OF THE REGISTRAR.
- 9. SUBMIT ALL SUPPORTING DOCUMENTATION FOR YOUR MEDICAL LEAVE OF ABSENCE REQUEST AS NOTED IN THE POLICY ABOVE.**
10. FORM IS ACCEPTED VIA YOUR ADLER E-MAIL ONLY. FORMS THAT ARE DROPPED OFF, MAILED, OR FAXED WILL NOT BE ACCEPTED.

ADMINISTRATION INSTRUCTIONS:

1. YOU DO NOT NEED TO PRINT THIS FORM!
2. SIGN THE FORM BY TYPING YOUR NAME AND **SEND IT BACK TO THE STUDENT**, SO THE STUDENT CAN CONTINUE TO COLLECT SIGNATURES.
3. FORMS WITH MISSING SIGNATURES WILL NOT BE ACCEPTED BY THE OFFICE OF THE REGISTRAR.
4. FORM IS ACCEPTED VIA E-MAIL ONLY. FORMS THAT ARE DROPPED OFF, MAILED, OR FAXED WILL NOT BE ACCEPTED.

NOTIFICATION OF MEDICAL LEAVE – CHICAGO CAMPUS

****PLEASE OBTAIN SIGNATURES IN THE ORDER LISTED BELOW****

FORMS WITH MISSING SIGNATURES WILL NOT BE ACCEPTED BY THE OFFICE OF THE REGISTRAR

STUDENT SIGNATURE:

DATE:

PLEASE TYPE YOUR NAME AND DATE

(Your signature indicates you have read and understand the information on this form and Adler University's Leave of Absence policy.)

Faculty Advisor:

(TYPE YOUR NAME AND DATE)

DATE:

**Program Chair/Director:
(TYPE YOUR NAME AND DATE)**

DATE:

**Director of Community Engagement - students on SJP (Camille Williamson - cwilliamson@adler.edu):
(TYPE YOUR NAME AND DATE)**

DATE:

**Director of Training - students on practicum, internship, or externship:
(TYPE YOUR NAME AND DATE)**

DATE:

**Student Affairs (studentaffairs@adler.edu):
(TYPE YOUR NAME AND DATE)**

DATE:

**Financial Aid (financialaid@adler.edu):
(TYPE YOUR NAME AND DATE)**

DATE:

Registrar's Office Use Only:

Registrar's Office Representative Signature and Date Received (with all signatures):

Registrar's Office Representative Signature and Date Date Processed:

Student's Last Date of Attendance: