

THE ANNENBERG SCHOOL FOR COMMUNICATION
UNIVERSITY OF PENNSYLVANIA

PhD LEAVE OF ABSENCE FORM

Student's Name:

Faculty Advisor:

Email while on leave:

Telephone number while on leave:

Explain the reasons for your leave and how you plan to spend your time while on leave.

- Students requesting Family Leave, please [review the policy and fill out the online form.](#)
- Personal Leave
- Military Leave
- Medical Leave*

*If you are taking a medical leave, and if the Annenberg currently covers your Penn Student Health Insurance, would you like the School to continue covering PSIP for one semester while you are on medical leave? **YES NO**

*PhD Students taking medical leave: Medical documentation is required to request a medical leave and to return from medical leave. Please ask your healthcare provider to email documentation to Student Health & Counseling with the subject line: Request Leave of Absence or Return from Leave of Absence. Email: wel-shsinsur@pobox.upenn.edu. Do not provide medical documentation to faculty or staff in your Graduate Group.

Leave will begin: <date, semester and year>

Please indicate the **last date** you attended classes in the current semester:
(If your leave request is for the next semester, please use the last day of classes in the current semester.)

Anticipated Return from leave: <semester and year>

PhD Students: Medical documentation is required to request a medical leave and to return from medical leave. Please ask your healthcare provider to email documentation to Student Health & Counseling with the subject line: Request Leave of Absence or Return from Leave of Absence. Email: wel-shsinsur@pobox.upenn.edu. Do not provide medical documentation to faculty or staff in your Graduate Group.

Advisor Signature

Date

Signature, Assoc. Dean for Grad Studies

Date