



Medical Leave of Absence or Course Reduction Documentation Form

NOTE: This form is to be completed by the student's health care provider with information relevant to the student's request for a leave of absence from the university or course load reduction, as defined below.

Medical leave of absence (MLOA): A voluntary withdrawal from the University in order to improve mental or physical health, which has been supported by a medical or mental health provider and approved by the Dean of Academic Achievement. The university tuition refund policy applies, effective from the date the MLOA is requested.

Medical course load reduction (MCLR): A voluntary course load reduction after published deadlines for withdrawing from courses, which is granted in order to improve mental or physical health. Students who go below 12 credits (full-time status) may continue to participate in the university, however, this may affect financial aid packages and/or loans.

Please complete this form and submit it directly to:

Dean of Academic Achievement
514 University Avenue, Fisher Hall 206
Susquehanna University
Selinsgrove, PA 17870
Fax: 570-372-2778
Office Phone: 570-372-4412

Form with fields: Health Care Provider Name, Student Name, Health Care Provider Address & Phone Number, Dates of Treatment, Profession and License Number, Diagnosis

Please indicate specific findings that have impeded the student's class attendance and/or participation.

Has the student engaged in any of the following safety-related behaviors in regard to this diagnosis?

- Yes  No  N/A Managing academic stress and academic rigors
- Yes  No  N/A Self-care (e.g. adequate sleep, time management, nutrition, exercise)
- Yes  No  N/A Managing symptoms
- Yes  No  N/A Managing the social demands of college life
- Yes  No  N/A Suicidal ideation
- Yes  No  N/A Suicidal behaviors
- Yes  No  N/A Self-injury behaviors
- Yes  No  N/A Substance abuse behaviors
- Yes  No  N/A Failure to maintain weight at minimum of 90% of ideal body weight for height
- Yes  No  N/A Food bingeing or restricting
- Yes  No  N/A Food purging or any other potentially harmful compensatory behaviors used for weight management (e.g., use of laxatives, excessive exercise, etc.)
- Yes  No  N/A Behaviors that threaten others (e.g. violence, stalking)
- Yes  No  N/A Other:

What alternatives to course withdrawal(s) or leave of absence have been considered or tried?

What interventions and treatment do you recommend while the student is on medical leave/has a reduced course schedule?

Health Care Provider Signature

Date

---