



# Leave of Absence Policy

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## Policy Statement

Students must sometimes interrupt their studies for a variety of reasons (illness, car accidents, death in the family, a natural catastrophe, or employment hardships, etc.). Students choosing to take a leave of absence should first contact their cohort/academic advisor to discuss their plans while on leave to work out any conditions that may be necessary for a smooth return to SUM Bible College & Theological Seminary (SUM).

A student may leave SUM by either withdrawing from the university (this means leaving the university with no intention of returning) or by taking a leave of absence (this means leaving the university temporarily, with the firm and stated intention of returning). Notifying instructors or no longer attending classes does not complete the process.

A Leave of Absence form must be filled out by the student. If a student is unable to fill out the LOA Form, an academic advisor may submit it on the student's behalf.

## Instructions

The student must submit these documents to the Academic Department (E: [sum@sum.edu](mailto:sum@sum.edu)):

1. A completely filled *Leave of Absence Form*
2. A *letter* detailing the reason for the leave of absence, an action plan detailing the student's resolution of the event(s), and a time table detailing when the student will return to the academic program
3. Any *supporting documents* demonstrating hardship

## Academic Department Action Steps

The Academic Department is responsible to communicate any approved LOA's to the Financial Aid Office, within two weeks of the student's Last Day of Attendance, in order for proper procedures to be taken in the handling of Title IV aid. The length of time for the leave of absence is determined by the student's action plan and must be agreed upon by the college and the student but is not to exceed the 180 days in any 12 month period as mandated by the Department of Education and must resume their coursework at the same point in the academic program that they began the LOA. The student may not receive any additional Title IV funds until they have completed the coursework required for the term in which the LOA occurred. If future developments warrant an amendment to the action plan, the student must submit a revision to the action plan which will be approved or rejected by the college.

Title IV recipients who fail to fulfill the LOA action plan and have exhausted the appeals process may be subject to a revised loan repayment schedule including the expiration of the grace period granted under the terms of the repayment of Title IV Loans. SUM will report the student's last day of attendance in accordance with Federal Regulations.

When the college grants a leave of absence, an official letter will be given to the student and a copy placed in the student's permanent records. In a timely manner, the student will provide updates on the action plan's progress to the college. If the student fails to honor the agreement, the college will withdraw the student from the academic program and inform the appropriate government agencies of the official withdrawal from the college. The student will be notified of the college's action and will have 30 days to file an appeal which details the student's reasons for reinstating the leave of absence. The college's executive committee will rule within 10 days its decision to accept or reject reinstatement.

**Students: Approval cannot be assumed. You will be notified of the decision.**



# Leave of Absence Form

Complete this form if you intend to take a leave of absence from SUM. Read the policy on the following pages prior to completing this form. Prior to leaving, you must contact your cohort or academic advisor. A leave of absence could have a significant financial impact on the student.

Student Information	
Student Name (First, Middle, Last Name)	ABHE Student ID Number
Current Mailing Address, City, State, Zip Code	Degree Program
Phone Number	SUM Email Address

Leave of Absence Information	
Last Date of Attendance	Date of Expected Return (Must not exceed 180 days in a 12 month period)

Checkmark one reason & summarize. Attach a detailed a letter with supporting documentation.

<input type="checkbox"/> <b>Family Issues / Emergency</b>	_____
<input type="checkbox"/> <b>Employment Issues / Emergency</b>	_____
<input type="checkbox"/> <b>Chronic Illness / Disability</b>	_____
<input type="checkbox"/> <b>Sudden Illness / Accident</b>	_____
<input type="checkbox"/> <b>Natural Catastrophe</b>	_____

Signatures	
Student Signature	Date
Advisor Signature	Date
Chief Academic Officer	Date

Office Use Only	
Leave of Absence Form Received	Date
Academic Department Approved/Denied	Date
Sent To Financial Aid Office	Date
Sent to Business Office	Date
Student Notified	Date