IRis

Northeastern University

UHCS Forms

University Health and Counseling Services

March 01, 2012

Request for Medical Leave of Absence Form

University Health and Counseling Services, Northeastern University

Recommended Citation

University Health and Counseling Services, Northeastern University, "Request for Medical Leave of Absence Form" (2012). *UHCS Forms*. Paper 5.

This work is available open access, hosted by Northeastern University.

Request for Medical Leave of Absence (MLOA)

Name_____ID_____

Semester requesting a medical leave of absence for: _____

Last date in class _____ Last date in Residence Hall (if applicable) _____
(mm/dd/yy)

Do you receive financial aid? Yes ___ No ___

It is required to submit documentation to detail substantiating medical condition (from MD, DO, NP, PA or licensed mental health clinician) with diagnosis, treatment plan -- including medications if prescribed, and reason medical leave is recommended.

1. Documentation will be submitted to UHCS Medical Leave Coordinator on _____
(date)

2. Leave recommended by UHCS clinician _____ _____
(name) (date)

I have read information regarding deadlines and implications of a MLOA on the UHCS website under the Access to Care tab and in the Student Handbook. I understand the MLOA will not be initiated without approval by UHCS.

I understand that re-entry from a medical leave requires a completed request for re-entry form, a clinician's letter recommending that student return to classes and description of care given, as well as documentation from a clinician outside of UHCS of an appointment date after re-entry. Students must attend classes on Northeastern campus for the semester they wish to return from medical leave of absence. All documentation supporting the re-entry to classes must be faxed, sent, or delivered to UHCS on or around one month prior to the planned re-entry.

Student's Signature_____ Date_____

Address during leave _____

Phone _____ _____
(cell) (home)

Return this form to Medical Leave Coordinator, UHCS, 135 FR, NU, Boston, MA 02115 or, fax to (617.373.2601). Phone: 617.373.2772 option #4.

March 21, 2012