

RETURN TO:
SUU Admissions Office or
Financial Aid Office
351 W University Blvd
Cedar City, UT 84720

REQUEST FOR SCHOLARSHIP DEFERMENT OR LEAVE OF ABSENCE

A scholarship deferment will hold your scholarship until you return. You may not defer a one-year award. A leave of absence will allow you to choose the catalog you are currently using or the new catalog upon your return. If you do not obtain a leave of absence you will use the new catalog upon your return. It is **not** necessary to submit a Leave of Absence request for a **one semester** absence.

Acceptable reasons to defer your scholarship or to receive a leave of absence include, but are not limited to: military service, medical, or church service. Requests must be approved by the appropriate committee. You cannot defer a scholarship or receive a leave of absence and attend any other institution of higher learning.

The leave of absence allows you to return without reapplying or paying the \$15 reapplication fee. You must notify the admissions and scholarship offices of your return in a timely manner. You must **DROP** courses if you have registered for the semester you plan to leave. Drop courses and withdraw from school through your SUU Portal. Scholarship deferments and/or leaves of absence may be granted for a maximum of five semesters.

The Family Educational Rights and Privacy Act restricts information from being released or another person conducting business for a student. You may consider giving authorization to transact business for you during your absence. This will allow someone else to assist you with registering for classes, review statements, etc. You may complete the information or information and the authorization form is available at <http://suu.edu/ss/registrar/pdf/ReleaseofInformation.pdf>.

PERSONAL

T-Number: _____ Last Name: _____ First Name: _____
 Preferred Name: _____ E-mail: _____
 Permanent Mailing Address (P.O. Box) _____
 City: _____ State: _____ Zip: _____
 Permanent Phone: _____ Current Major: _____ Cum. GPA: _____

REQUEST

Reason(s) for your request: _____
 Defer Scholarship
 Semester you plan to return to SUU (Required): _____
 Scholarship(s) being deferred: _____
 Leave of Absence
 Semester you plan to LEAVE SUU (required): _____
 Semester you plan to RETURN to SUU (required): _____
 Catalog you are currently using: _____
 Release of Information
 If you give permission for another person(s) to transact business at SUU for you, please list the names below:
 Name(s) _____ Relationship: _____
 Mailing address: _____ Email: _____
 City: _____ State: _____ Zip Code: _____ Phone: _____
 Student Signature _____ Date: _____

OFFICIAL USE ONLY:
 Scholarship Deferment
 Approved Denied Signature _____ Date _____
 Leave of Absence
 Approved Denied Signature _____ Date _____
 Comments: _____