

Nova Southeastern University 3300 S. University Drive Fort Lauderdale, FL 33328

Undergraduate Student Leave Request Form

This form is used to make and approve leave requests for U-RISE@NSU students. Requests for leave from appointment duties should be made four weeks in advance. Students on leave from their appointments must generally continue to meet minimum registration requirements.

Section I. To be completed by the student and submitted to their mentor						
	me (print):					
Dates of requested absence (MM/DD/YYYY): From: To:						
Leave type:	Vacation University business	Sick/Oth	er Leave _eave		Parental Leave Bereavement	
Comments:						
I certify that the information provided as part of this request is true, accurate, and complete. I understand that a person who, knowingly and with intent to defraud, requests leave using materially false information is guilty of fraud, which may result in disciplinary action.						
Student Signature:		Date:				
Section II (T	o be completed by Advi	sor):				
Action: Ap	<u></u>	Not Approved				
Comments if Not Approved (or attach explanation):						
Mentor's Sigr	nature:			Date:		
U-RISE Progr	am Director:			Date:		
cc:		(Student's Me	entor)			
(U-RISE Program Director)						