

Notification of Military Activation

The University of Utah • Office of the Registrar • 201 S 1460 E RM 250 N • Salt Lake City UT • 84112

University policy regarding students who are called without prior notice to active US military duty offers the following four options or any combination thereof:

- At the discretion of the instructor, students may make arrangements to receive an incomplete (I) grade for one or more class(es). Refer to the <u>Student Handbook</u> for a complete description of the Incomplete Grading Policy.
- Students may make arrangements, when appropriate, with an instructor to complete the course work for a grade prior to a departure for active duty.
- Students may request a total or partial withdrawal.
- Students may request to delete one or more class(es).

Note: Students who choose to withdraw or to have class(es) deleted should first determine the impact, if any, on insurance coverage, financial aid awards, loan repayments, veteran benefits, etc., which may require evidence on the academic record of course completions and/or enrollments.

Complete the reverse side of this form for each class on your schedule. All requests require the student's signature and official documentation (military orders).

- 1. Indicate department, catalog number, and section number for each class.
- 2. Choose the action [withdraw (W), delete, incomplete (I), or no action taken] that will be applied to each class.
- 3. If you have veteran benefits, meet with each instructor to establish a "last day of attendance" for each class. Have the instructor sign and date the appropriate lines on the reverse side of this form.
- 4. Submit this form along with the required documentation in person, via US mail, or fax.

| Term/Year: | | | | |
|---|---|--|--|--|
| Student Name: | | Stude | Student ID #: | |
| years (six acad students who need to exten requesting an e | demic terms) as provided under have registered for and attended this leave of absence, new oextension. If you do not register f | Utah Board of Regents po I university credit class(es) r rders must be submitted to or the term indicated below | igibility of enrollment to a total of two licy. Officially admitted undergraduate may request a leave of absence. If you or our office with a written statement, you will need to readmit through the versity: | |
| | | | nis military activation are final and may thout complete information will not be | |
| Student Signature | | | Date | |
| | FOR RE | GISTRAR'S OFFICE USE ON | LY | |
| Comments: | | | | |
| | | | | |
| Entered | Photo Identification | Documentation | Leave of Absence | |
| Verified | Veteran Affairs | Financial Aid | RCA Sent | |

| Student Name: | | Student ID #: | Term/Year: | |
|-------------------|-----------------------------|--|--|--|
| All students must | complete the section below: | Students receiving Montgomery GI Bill bene | enefits must complete the section below: | |
| Department | Catalog Number Section | | Date | |
| Withdraw (W) | No Action Taken | As instructor for this course, I hereby certify that the above mentioned student last attended the class on the date stated below. | | |
| Incomplete (I) | Delete | Instructor Signature | Last day of attendance | |
| Department | Catalog Number Section | Instructor Name (please print) | Date | |
| Withdraw (W) | | As instructor for this course, I hereby certify that the above mentioned student last attended the class on the date stated below. | | |
| Incomplete (I) | Delete | Instructor Signature | Last day of attendance | |
| | | instructor orginature | Last day or diteriornice | |
| Department | Catalog Number Section | Instructor Name (please print) | Date | |
| Withdraw (W) | No Action Taken | As instructor for this course, I hereby certify that the above mentioned student last attended the class on the date stated below. | | |
| Incomplete (I) | Delete | | Last day of attendance | |
| Department | Catalog Number Section | Instructor Name (please print) | Date | |
| Withdraw (W) | No Action Taken | As instructor for this course, I hereby certify that the above mentioned student last attended the class on the date stated below. | | |
| Incomplete (I) | Delete | | Last day of attendance | |
| Department | Catalog Number Section | Instructor Name (please print) | Date | |
| Withdraw (W) | No Action Taken | As instructor for this course, I hereby certify that the above mentioned student last attended the class on the date stated below. | | |
| Incomplete (I) | Delete | Instructor Signature | Last day of attendance | |
| | | | | |
| Department | Catalog Number Section | Instructor Name (please print) | Date | |
| Withdraw (W) | No Action Taken | As instructor for this course, I hereby certify that the above mentioned student last attended the class on the date stated below. | | |
| Incomplete (I) | Delete | Instructor Signature | Last day of attendance | |