Columbia University • College of Physicians and Surgeons
Student Request for Leave of Absence or Extended Curriculum

*All students must meet with Dean Mellman in order to be granted a Leave of Absence or Extended Curriculum and must contact her 3 months prior to their expected date of return in order to receive approval for return

Complete this form to request a Leave of Absence or Extended Curriculum at CUMC/CU and return it to the Senior Associate Dean for Student Affairs, P&S 3-401.

Leave of Absence:
1. A leave of absence may be granted if a student is unable to continue medical studies because of illness or emergency family problems. For medical or psychiatric illnesses, documentation determined to be appropriate by the Office of the Dean must be submitted.
2. A leave of absence for military service is granted if the student is called or ordered to active duty or conscripted.
3. A leave of absence will be granted by the Dean only in exceptional circumstances to students who have not completed the first semester.
4. The Dean may stipulate conditions for the granting of a leave, for students while on leave, and for return, including an administrative medical or psychiatric evaluation and/or a review by the appropriate faculty committee. Such review does not guarantee readmission.
5. Students approved for return after leave in the first semester of Fundamentals will restart the curriculum.
6. In most cases, leaves are granted for a maximum of one year. Extensions for extended military service or continued recuperation from illness may be granted on a case by case basis. After two years, a student on a leave of absence may have their matriculation terminated; the student would be permitted to apply for readmission at a later time.
7. Students are not permitted to live in campus housing while on a leave of absence.

Extended Curriculum of CUMC or CU:
1. Students arranging a year of research or a dual degree at Columbia (unless accepted to OMFS, Oral Pathology, or MD/PhD upon admission) must meet with Dean Mellman to discuss the plan.
2. Once the plan is final, students must submit this form, accompanied by a statement from the mentor describing the research, start and end dates, and that he or she will supervise the student.

Student Contact Information (during Leave or Extended Curriculum):
Student Name: ____________________________________________ CU EMAIL: _______________________
Mailing Address: ___________________________________________ Non-CU Email if LOA: _______________________
Home Phone: _____________________________ Cell Phone: ____________________________________________

☐ I am requesting a Leave of Absence from (Month/Year) ________________ to ________________

Reason for leave of absence: ____________________________________________________________

☐ I am requesting Extended Curriculum at CUMC/CU for _______ from (Month/Year) __________ to _______
(Research/MPH/MBA, etc.)

If research year, my Mentor is ____________________________ Dept.________________ Email___________________

DEAN'S APPROVAL OF LEAVE:
Approved ☐ Denied ☐ Date: ___________________________
_________________________________________________
Print Name Sign