Practicum Leave of Absence Request Form

This form is to be used in the event that a student who is participating in a UWGB nursing practicum (BSN, RN-BSN, or MSN) requires leave from a practicum course (e.g. clinicals). Prior to being granted a leave of absence (LOA), the student must **submit this form to the Nursing & Health Studies Chairperson with the practicum/clinical instructor CC'd** as soon as possible but ***not less than one week prior*** to the planned leave. Form submission does not equate to approval. The LOA is not official until approval notification is received by the student.

Each request will be evaluated based on necessity, time involved, and availability of an instructor's and/or the practicum agency's ability to accommodate the change in schedule.

LOAs in excess of two weeks may result in removal from the practicum/clinical course. Students needing **clinical makeup** may have to pay the associated cost of instruction (i.e., faculty time).

Name of Student requesting Practicum LOA:

Course Title & Number:

Requested start date of leave:

Expected return to practicum date:

Supporting Rationale for LOA/Additional Provisions:

Date submitted:

Decision date:

Approved: Yes No (reason:)

Planned makeup (if known):

NHSU Chair Signature: