SOLANO COMMUNITY COLLEGE
APPLICATION FOR A PLANNED EDUCATIONAL LEAVE

Directions:

1. Read the attached information sheet to determine if a Planned Educational Leave is appropriate for you.
2. Complete the application by supplying all the information required.
3. Pay all outstanding fees.

It is the student’s responsibility to investigate the effect of a leave upon such matters as financial aid, veteran’s benefits, etc…

Please print clearly.

Last Name                     First Name                     Middle Initial           SCC ID #

Date of Birth

Please indicate where notification of the Planned Educational Leave should be mailed.

Street Address                  City             State          Zip

Planned Educational Leave to begin on __________________ and will return on ___________________

My reasons for taking a Planned Educational Leave are:

☐ Medical   ☐ Personal
☐ Travel    ☐ Clarify Goals
☐ Financial ☐ Job Related
☐ Other

Please provide an explanation of items checked above:

SCC USE ONLY

☐ Approved                     ☐ Denied

Signature                        Date

Rev. 7/12