

VILLANOVA UNIVERSITY
Request for Medical Leave of Absence (MLOA) Form

General Information

A student may experience physical or psychological conditions that significantly impair the student's ability to function successfully or safely in their role as a student. In such cases, the student may decide that time away from the University for treatment and recovery can help restore functioning to a level that will enable the student to return to the University and perform successfully both in and out of the classroom. The University has an interest in students receiving appropriate care not only for their own well-being, but also for the well-being of the larger community with whom the student interacts.

It is expected that the time a student takes away from the University for the MLOA is used for treatment and recovery. When a student initiates a MLOA, Villanova University may establish criteria regarding the student's eligibility for returning to the campus community. The criteria include, but are not limited to, compelling evidence that the student is ready to resume studies and be a successful member of the campus community, with or without accommodations. Compliance with the treatment expectations is a primary factor in the University's decision of whether to approve a student for return to Villanova.

Requesting a Medical Leave

To request a MLOA, a student shall:

1. Complete this MLOA Request Form and submit it to the Dean's office of the student's academic college or the Dean of Students office, or their designee;
2. Meet with the appropriate Dean or their designee who is reviewing the leave request;
3. If deemed necessary by the reviewing Dean or their designee, undergo an evaluation by the Student Health Center or the University Counseling Center; and
4. If evaluated, sign a Release allowing the Student Health Center and/or the University Counseling Center to discuss the evaluation with the reviewing Dean or their designee.

Returning from a Medical Leave

To return from a MLOA, the student must:

1. Provide written notice of the student's intent to return to the Dean's office that granted the leave, by July 1 for Fall semester, April 1 for Summer semester, or December 1 for Spring semester. The notice must include the following documentation from the student's treating providers regarding:

- a. the treating provider's work with the student and the student's clinical status;
 - b. an opinion as to the student's readiness to resume academic studies, with or without reasonable accommodations;
 - c. an opinion as to the student's ability to function as a successful member of the campus community, with or without reasonable accommodations; and
 - d. a completed Community Provider Report Form for Student's Requested Return to Villanova University.
2. Sign a Release allowing appropriate University professionals to communicate directly with the student's treating providers;
 3. If deemed necessary by the reviewing Dean or their designee, be evaluated by the Student Health Center and/or the University Counseling Center; and;
 4. Demonstrate that the student has met any conditions or requirements that were specified for the student's return to the campus community.

MLOA Acknowledgement

In requesting a MLOA, I acknowledge the following:

1. The duration of a MLOA will be based on an individualized assessment of current medical knowledge and/or the best available objective evidence at the time of the request. Upon a request to a return from a MLOA, the University may re-evaluate the student. If the student cannot demonstrate that they are ready to resume studies and be a successful member of the campus community, with or without accommodations, the MLOA may involve additional time to increase the student's opportunity for success upon their return to the University.
2. The University's Transfer Credit Policy provides: "Normally, Villanova will not pre-approve courses, or transfer credits back to Villanova, for students who will be on a University leave of absence when they enroll in such courses," and while on a MLOA, a student may not normally take courses offered by Villanova University (including distant learning courses) unless the circumstances warrant otherwise as determined by the student's academic Dean's office.
3. I should consult, as needed, with the Office of Financial Assistance.

Request for a Medical Leave of Absence

I request a MLOA for the following reason:

Physical Health reasons (please explain briefly in the space provided):

Psychological Health reasons (please explain briefly in the space provided):

I have read the information above and have asked for any needed clarification and explanation. I accept these conditions and deadlines as part of my responsibilities in taking a medical leave of absence from Villanova University. I agree to abide by these conditions, and I request that I be granted a leave of absence for health reasons. I understand that my signing this form does not guarantee that I will receive a MLOA from Villanova University.

Name of Applicant:

Signature of Applicant:

Banner ID#:

College:

Date:

Cell Phone (or other number) where we may call and leave a message for you:

International Students Only

I have consulted with the International Students Services Office Yes _____ No _____
