GRADUATE SCHOOL OF ARTS & SCIENCES
REQUEST FOR NEW CHILD LEAVE

Full-time graduate students in Arts and Sciences may take a New Child Leave as they assume care for a new child, under the following conditions. They should maintain full-time student status, either by registering for at least nine credit hours (such as Independent Study, etc.) or as Continuing Students. Students on New Child Leave are eligible to receive their normal stipend payments for 34 working days. Additional time off without pay for up to eight weeks will ordinarily be granted by the Graduate School with permission of the students' Department.

If longer periods of Leave are desired, students will be expected to renew academic registration as Non-Resident Candidates. In that case, continuation of Health Insurance coverage must be arranged directly with the University's insurance provider (without a University subsidy) or elsewhere. Students are advised to consult with Graduate School and Departmental staff as they contemplate long-term plans. Students who receive support from external agencies should consult policies and guidelines of the sponsor. (Effective Spring 2005)

PLEASE PRINT

(1) STUDENT REQUEST

Date: _____

Name:_____ _____ _____ WU student number: _____
Last First Middle Initial

Expected beginning date of leave _____
Expected date of return _____

Expected date of birth/adoption ___/__/20__

☐ I receive support from an external agency _____ and have consulted the policies and guidelines of this sponsor.

I will be the primary caregiver for my new child during this period and will maintain full-time student status.

_____ _____
Student Date Graduate Program Advisor Date

To have your leave approved, this request must be signed first by your graduate program advisor and then submitted to the Graduate School (153 N. Brookings) for approval by the Dean.

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(2) DEPARTMENTAL APPROVAL

_____
Department Chair Date

Please provide actual date of birth/adoption of child when available to determine starting date of award. This may be e-mailed to lynn.lowry@wustl.edu or mailed to her at Campus Box 1187.

(3) GRADUATE SCHOOL APPROVAL

_____
Dean, Graduate Arts and Sciences Date

(4) GRADUATE SCHOOL USE ONLY

Notification of Leave Sent To:

_____ Department (_____)

_____ Student (award letter)

_____ Assistant Registrar (Milestone 8011)

_____ Associate Dean (re financial aid)

_____ Graduate School Payroll

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