

# IN ABSENTIA STATUS REQUEST

Use this form if you are in good standing and, for academic reasons, need to spend an entire fall or spring semester away from campus. In Absentia Status is granted for work that is directly related to the student's academic course of study and is integral to the degree. Submit this form to the Graduate School at least two weeks prior to the start of the semester in which In Absentia Status is requested. International students must consult with an international student advisor to discuss how In Absentia Status affects their immigration status. The student is responsible for enrolling in 1 credit hour for the term for which In Absentia Status is granted.

<b>Last/Family Name</b>	<b>First/Given Name</b>	<b>Middle Name</b>
<b>Last 4 digits of VT ID:</b> _____	<b>Citizenship</b> U.S. Citizen      Permanent Resident      Non-U.S. Citizen*	
<b>E-mail Address:</b> _____ <small>@vt.edu account, preferred</small>	*If non-U.S. citizen, please list your visa status: _____	

<b>Campus</b> Blacksburg    Hampton Roads    National Capital Region    Richmond Roanoke    Southwest Virginia    Virtual	<b>Current Program</b> _____
<b>Term(s) for which Requesting In Absentia Status (maximum of two consecutive terms)</b> FALL    SPRING    YEAR _____	<b>Degree Level</b> Doctoral Education Specialist Master's
<b>Expected Term to Return to Campus</b> FALL    SPRING    SUMMER    YEAR _____	

Please describe how the work that will be completed while in absentia is directly related to your academic course of study.

During the period of my In Absentia Status I will be stationed at least 50 miles from Blacksburg and will not work on or in conjunction with any VT extended campus or facility.

STUDENT Signature

Date (MM/DD/YY)

COMMITTEE CHAIRPERSON Signature      Printed Name      e-mail (@vt.edu, preferred)      Date (MM/DD/YY)

DEPARTMENT HEAD Signature  
or AUTHORIZED GRADUATE PROGRAM DIRECTOR      Printed Name      e-mail (@vt.edu, preferred)      Date (MM/DD/YY)

DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature      Date (MM/DD/YY)

INTERNATIONAL ADVISOR (for F-1 and J-1 students) Signature      Date (MM/DD/YY)

GRADUATE SCHOOL Signature      Date (MM/DD/YY)

Submit your completed form:  
**<https://gs.vt.edu/forms>**  
120 Graduate Life Center, Blacksburg  
NVC 7054 Haycock Road, Falls Church  
For assistance, call 540-231-8636 or  
e-mail [grads@vt.edu](mailto:grads@vt.edu)