

# Medical Leaves of Absence

## A to Z

Kevin Charles DEd, FACHA  
Asst. VP, Stu. & Acad. Svcs., and Exec. Dir. Health Services  
University of New Hampshire (Durham)

# University of New Hampshire

## *At a Glance...*

Founded 1866 - Land Grant, Sea Grant and Space Grant Charter

### Colleges and Schools

- Graduate School
- College of Engineering and Physical Sciences
- College of Liberal Arts
- College of Life Sciences and Agriculture
- College of Health and Human Services
- Peter T. Paul College of Business and Economics
- Thompson School of Applied Science
- UNH School of Law
- University of New Hampshire at Manchester

# University of New Hampshire

Number of Full-time Faculty:	976
Number of Full-time Staff Members:	1,702
Number of Students:	14,500
Undergraduate	12,200
Graduate	2,300

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## Health (Medical or Psychological) Withdrawal Processes

- Involuntary (Administrative Separation) – Dean of Students
- Voluntary – AVP/Executive Director of Health Services

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## Number of Withdrawals in the last 5 years

- Involuntary: 6
- Voluntary:
  - Total 516
  - Range per year 93 - 112
  - Average per year 103
  - Percent Psychological 70%
  - Percent Medical 30%

# University of New Hampshire

- During the fall and spring semesters, when classes are in session, through the Assistant Vice President for Student & Academic Services/Executive Director of Health Services
- After classes end, College Associate Dean
- Within one week of talking with AVP, student must request a letter from health care provider (physician, therapist, etc.)

## **Specifications:**

- Letter must be typed on office letterhead stationery
- Must indicate the diagnosis and/or specific nature of health condition
- Clinician verify/support this as the reason for need to withdraw
- Letter remains at Health Services

# Sample Letter To Support a Health Withdrawal

Date

Dear Dr. Charles,

I am writing in support of a health withdrawal for \_\_\_\_\_ (name & DOB) for the \_\_\_\_\_ semester at the University of New Hampshire because of a diagnosis of \_\_\_\_\_.

I have seen this patient on the following dates or period of time: \_\_\_\_\_ and verify and support this health condition as the reason for his/her need to withdraw from UNH.

Sincerely,

health care provider's name/credentials

# Form: Request to Withdraw from UNH for Health (Medical or Psychological) Reasons

**Note:** A health withdrawal is a complete separation from the University (not a leave of absence). Once a student has withdrawn from UNH, the student must apply for readmission through the Admissions Office.

Withdrawal is requested for \_\_\_ Fall \_\_\_ Spring Year: \_\_\_\_\_

I, \_\_\_\_\_ (legal name printed), \_\_\_\_\_ (ID# or DOB \_\_\_\_\_),

request a withdrawal from the University of New Hampshire for health reasons.

I have read and understand the "Health Withdrawal Process and Readmission Policy" (available at <http://www.unh.edu/health-services/withdrawals>). I understand that if this request is approved, it is effective immediately and may not be rescinded. I further understand that it is UNH policy that students are prohibited from readmission until one semester has elapsed following a health withdrawal.

\_\_\_\_\_ (Signature and date) \_\_\_\_\_ (email) \_\_\_\_\_@wildcats.unh.edu



# University of New Hampshire

- Explanation of campus resources and contact information: Housing/Res. Life, Dining, Registrar, Business Office, College Dean, Dean of Students, Disability Services for Students Office, Student Health Benefits Plan, etc.
- We will also assist with outside connections to local therapists, physicians, etc.

# University of New Hampshire

## Readmission Process

- Every student who plans to return to the University must apply through the Admissions Office
- Letter from health care provider who has treated the student since the withdrawal

### Specifications:

- Must be typed on office letterhead stationery
  - Must indicate the extent of treatment and readiness to resume studies, as well as a description of the current status of condition
  - Any special needs that may be required upon arrival on campus?
- Letter sent directly to Health Services, Executive Director's Office,

# Sample Letter

## Readmission after a Health Withdrawal

Date

Dear Dr. Charles,

I am writing in support of the readmission of \_\_\_\_\_ (name & DOB) to the University of New Hampshire for the \_\_\_\_\_ semester after taking a health withdrawal.

I have seen this patient on the following dates: \_\_\_\_\_ for treatment of \_\_\_\_\_.

The current status of his/her condition is: \_\_\_\_\_.  
I support his/her readiness to return to UNH.

Sincerely,

health care provider's name/credentials

# University of New Hampshire

- The health care provider's information is confidentially reviewed by the Executive Director of Health Services
- The Admissions Office will consult with the Executive Director of Health Services and Academic Dean before making a final decision regarding admission

# Health Withdrawal Processes Vary Greatly

e.g., New England Land Grant Universities:

- U of MAINE -- Bursar's Office
- U of Vermont -- College Dean's Office
- U of NH -- AVP/ED Health Services
- UCONN -- Dean of Students Office
- UMASS-Amherst -- Health Services (Medical Director)
- URI -- Appropriate Dean's Office