

## Return from a Leave of Absence

Name: \_\_\_\_\_  
Last First Middle

Student ID: \_\_\_\_\_ OSU Username (name.#): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Last Term Enrolled: \_\_\_\_\_

Previous name(s): \_\_\_\_\_

Current Address: \_\_\_\_\_

County: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Cell Carrier: \_\_\_\_\_

Permission to Text:  Yes  No Personal Email: \_\_\_\_\_

Returning Semester/Year: AU \_\_\_\_\_ SP \_\_\_\_\_ SU \_\_\_\_\_ Year \_\_\_\_\_

Desired major: \_\_\_\_\_

Did you attend another school since last enrolling at OSU?  Yes  No

Emergency Contact Name: \_\_\_\_\_  
Last First Middle

Contact Address: \_\_\_\_\_

Contact Relationship: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Today's Date: \_\_\_\_\_

For Internal Processing-

OSU GPA:

Course Completion Rate:



**THE OHIO STATE UNIVERSITY**  
MANSFIELD