

Name of Student:

USC ID:

USC E-mail:

Phone:

Semester Started at USC:

Semester that student is requesting LOA:

Cumulative GPA:

Number of Units Completed:

Was an MA Degree in Linguistics granted for this student: Yes No

Is the student International: Yes No

Total Number of Previously Approved LOA's (Only 4 LOA's can be granted without Graduate School Petition):

Plans for academic progress after return from LOA:

Reason for requesting LOA:

Student Signature: _____ Date: _____

Faculty Advisor Signature: _____ Date: _____

Director of Graduate Studies Signature: _____ Date: _____