



UNIVERSITY OF CALIFORNIA, MERCED  
Office of the Registrar

## Planned Educational Leave Program

5200 N. Lake Road, Merced, CA 95343 / Information: (209) 228-2734 / registrar.ucmerced.edu

The Planned Education Leave Program (PELP) allows a student to suspend academic work at UC Merced, leave the campus, and later resume studies with a minimum of procedural difficulties. Please see the Schedule of Fee Refunds policy in the catalog for specific details on refund rules. Return this form to the Students First Center. **A \$40.00 fee is required at time of filing this petition.**

**Personal Information**       Undergraduate     Graduate      UCM ID Number \_\_\_\_\_

Last name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

**Please print the address and phone number at which you can be reached during your leave.**

Phone number(s) \_\_\_\_\_ E-mail address \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### Program Information

Semester I would like the PELP processed:      Term:     Fall     Spring    Year: \_\_\_\_\_

This semester I have:       Registered for courses     Paid Fees     Attended class

Semester I will return to UC Merced:      Term:     Fall     Spring    Year: \_\_\_\_\_

**Attach a one page statement including reason you are requesting to be in the Planned Educational Leave Program. If you intend on enrolling at another school while in the PELP, you must get this supported by your advisor and clearly list those courses you plan on completing.**

*I certify that I am the above named person, the information I have provided is accurate, and I have read, understand, and accept the instruction regarding my leave of absence from UC Merced. I understand that I am responsible for checking my student account and paying any charges that may result from this action.*

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

### Signatures

Advisor: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor Comments:

Office Use Only:

Fin Aid Signature: \_\_\_\_\_ Date : \_\_\_\_\_

Title IV?     Yes     No

Registrar: New student in 1<sup>st</sup> Semester?     Yes     No      By: \_\_\_\_\_

Effective Date: \_\_\_\_\_ Code: \_\_\_\_\_

Processed date: \_\_\_\_\_ By: \_\_\_\_\_       Copy for FA

Updated on: 3/2/09