ADMINISTRATIVE LEAVE OF ABSENCE POLICY AND PAPERWORK
~UMKC SCHOOL OF MEDICINE, COUNCIL ON EVALUATION~

A leave of absence is an approved and defined period of time during which a student is not participating in the requirements of his/her program. A student might request a leave due to an emergency, because of medical or psychiatric illness or in order to participate in scholarly research or educational programs. The school might also place a student on leave in accordance with specific academic policies. Any leave will have academic and/or financial repercussions, and should therefore not be undertaken without considerable thought, planning and communication with school and university staff and advisors.

The School of Medicine allows for the following types of leave:
- Personal
- Medical
- Emergency
- Administrative

Any student who takes twelve or more consecutive months of leave, regardless of type, must undergo a status review prior to returning to the program. The status review allows the Councils on Evaluation and Curriculum to make appropriate curricular and/or remediation recommendations guiding the student's return to the School of Medicine.

Administrative Leave

An administrative leave of absence is defined as a period of time during which a student is not permitted to participate in the program due to academic performance or as the result of an appeal for retention. Administrative leave is determined by the Chair of the Council on Evaluation and is subject to the approval of the Coordinating Committee and the Dean or his/her designee.

Any student placed on administrative leave is personally responsible for ensuring the timely completion and submission of all required forms and supporting documentation, and for maintaining accurate course enrollment in the Pathway system. Administrative leave coincides either with the start of the month or academic term or with the date of a School of Medicine Coordinating Committee meeting. Administrative leaves conclude at the end of a month or academic term. Administrative leave is counted in whole months away from the program and may extend a student in the program an equivalent amount of time to the leave. A student may not request an extension of administrative leave but can, if appropriate, request personal leave by submitting all required forms and supporting documentation for Personal Leave to the Council on Evaluation. Students on administrative leave must petition for permission to take any National Board of Medical Examiners (NBME) exam, including all subject, board examinations and readiness assessment (i.e. CBSE, PBA) examinations. Enrollment in non-required coursework only while on administrative leave is permitted.

A student must return from administrative leave when he/she is prepared to adhere to the School of Medicine Technical Standards and the pre-approved period of time for the leave expires. Students request permission to return from administrative leave by submitting required forms and supporting documentation identified in this policy. In order to satisfy enrollment requirements, students must return to the program and register for coursework following an expired leave.

Procedure for Placement on Administrative Leave
1. The student receives notification from the Council on Evaluation that s/he meets criteria for placement on Administrative Leave.
2. The student completes the UMKC Request for Leave of Absence form and obtains all necessary signatures from Step 2 of that form.
3. The student submits the completed UMKC Request for Leave of Absence forms to the Council on Evaluation office no later than 3 days following the original notification from the Council on Evaluation.
4. Council on Evaluation staff will forward the leave information to the Registrar's Office for final processing and send an email notification to the student's university email account. The student must then facilitate any necessary change in enrollment in the Pathway system as a result of the leave.
5. During administrative leave, the student is required to monitor his/her UMKC email address and keep in contact with his/her ETC.

Procedure for Returning from Administrative Leave
1. The student completes the SOM Technical Standards document and the SOM Request for Return from Administrative Leave form and obtains the ETC, Docent and Council on Curriculum signatures.
2. The student completes the campus UMKC Request for Return from Leave form and obtains all necessary signatures from Step 2 of that form.
3. The student submits the completed SOM Technical Standards document, the SOM Request for Return from Administrative Leave and the UMKC Request for Return from Leave forms to the Council on Evaluation office no later than 10 days prior to the anticipated leave return date.
4. The Council Chair will review the paperwork and render a decision upon the request.
5. If the request for return from personal leave is approved by the Chair, Council on Evaluation staff will forward the information to the Registrar's Office for final processing and send an email notification to the student's university account. The student must then facilitate any necessary change in enrollment in the Pathway system as a result of the return.
6. If the request for return from personal leave is denied by the Chair, Council on Evaluation staff will notify the student and/or request any additional information necessary. *No student is permitted to return to the program or coursework without permission from the school.*

<u>Helpful information for completing the Administrative Leave paperwork on the following pages:</u>

- ✓ This packet of information contains both policy information and all required forms for administrative leave.
- ✓ It takes just one form to be placed on administrative leave, and three forms to return from administrative leave.
    - ○ To complete the process of being placed on leave, you must submit the UMKC Request for Leave form
    - ○ To return from leave, you must submit:
        - ▪ SOM Request for Return from Administrative Leave form
        - ▪ SOM Technical Standards document
        - ▪ UMKC Request for Leave Return
- ✓ For USMLE-related administrative leaves, the Council on Curriculum will determine when a student has demonstrated readiness and should return from leave.
- ✓ Remember to stay in close contact with your ETC and Docent while on leave.

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Request for Leave of Absence
OFFICE OF REGISTRATION & RECORDS

Please refer to the leave of absence policy in the UMKC Catalog for further information regarding this process.

Eligibility requirements for requesting a leave of absence:
1. Be a degree seeking student
2. Be registered and enrolled in classes for the current term
3. Be eligible to enroll and be in academic good standing, on probation, or on continuing probation with your academic unit
4. Have submitted all outstanding high school or transfer transcripts if conditional admission was granted for the student to enroll for the previous semester
5. Provide a personal statement and official documentation for why a leave of absence is being requested

Fee refund schedule – Students who request a leave of absence in the middle of a term are subject to the established fee refund schedule. Students who wish to petition for an exception to the refund policy will need to attach the form to their leave of absence request. Students should follow the normal procedures for withdrawing from classes.

Deadline for requesting a leave of absence – No later than the fourth week of the first semester of non-attendance

Leave of absence duration – A leave of absence will be granted for a maximum of two semesters (e.g. Fall and Spring or Summer and Fall). A student can request an extension for his or her leave of absence; however, the request for an extension cannot extend more than one year beyond the original date requested. Students who do not return by the date noted on their approved leave of absence form and who are not granted an approved extension will be required to reapply for admission to UMKC through the Office of Admissions.

STEP 1: Student information

Name _____   Date submitted _____

Student ID number _____

Attach your personal statement and documentation of why you are requesting a leave of absence to this form.

Requested leave of absence duration (maximum of 2 semesters)

From: Term _____ Year _____   **To:** Term _____ Year _____

Student level
____ Undergraduate
____ Graduate: ❏ iPhD   ❏ Other _____   *See your graduate program handbook for specific guidelines.*
____ Professional: Dentistry, Law, Medicine, Pharmacy

Academic unit (Undergraduate and Graduate)
____ College of Arts & Sciences
____ Conservatory of Music & Dance
____ School of Biological Sciences
____ Bloch School of Business and Public Administration
____ School of Computing and Engineering
____ School of Education

The following academic units have specific policies and procedures for student leaves of absence. Please refer to your program handbook.

____ School of Graduate Studies
____ School of Nursing

Academic unit (Professional)
The following academic units have specific policies and procedures for student leaves of absence. Please refer to your program handbook.

____ School of Dentistry
____ School of Law
____ School of Pharmacy
____ School of Medicine

STEP 2: Meet with the appropriate offices listed below as applicable to your situation.

Are you an International Student with an F1 or J1 visa?   ❑ Yes ❑ No
If yes, then meet with the International Student Affairs Advising office.

International Student
Affairs advising signature _____   Date _____

Are you receiving financial aid or scholarships?   ❑ Yes ❑ No
If yes, then meet with a coordinator in the Financial Aid & Scholarships Office.

Financial Aid & Scholarships
Office signature _____   Date _____

Are you a veteran receiving veterans' educational benefits? ❑ Yes ❑ No
If yes, then meet with the veterans' service coordinator in the Registration & Records Office.

Veterans' services
coordinator signature _____   Date _____

Do you have a balance due on your student account?   ❑ Yes ❑ No
If yes, then meet with the Cashier's Office to review your account and set up a payment plan.

Cashier's
Office signature _____   Date _____

You may also consider meeting with the following offices to discuss issues related to the services that they provide.
- Residential Life
- Campus Dining
- Parking
- Campus Health & Counseling Services

STEP 3: Academic unit approval and required signatures

Student signature _____   Date _____

Academic unit
representative signature_____   Date _____

STEP 4: Withdraw from classes for approved terms
If you are enrolled in the current term, and want your leave of absence to begin immediately, please follow the appropriate procedures to drop or withdraw from all of your classes. Students who request a leave of absence in the middle of a term are subject to the established withdrawal deadlines. Also, update your mailing address and contact information in Pathway if necessary.

STEP 5: Submission of approved form by the academic unit
This form and related paperwork will be submitted to the Registration & Records Office by the approving advisor or body in the academic unit.

For students in the School of Medicine, please also attach the completed change of status form.

APPEAL: If a student is denied a leave of absence, an appeal can be made per the policy in the UMKC Catalog. Please refer to www.umkc.edu/catalog/Policies_and_Procedures.html.

Registration & Records Office use only
❑ Approved   ❑ Denied: reason for denial _____

Length of leave approved (maximum of 2 semesters) _____

Term in which student is expected to return _____

Processed by _____   Date _____

❑ Notify student of approval or denial.
❑ Process leave request and note expected return date in Pathway; set student to detached status in Pathway for the length of the leave of absence.

❑ Notify academic unit of student's approved leave of absence and expected return date.
❑ Scan form and documentation into the K REC SECURE drawer in ImageNow.

REQUEST FOR RETURN FROM ADMINISTRATIVE LEAVE OF ABSENCE
~UMKC SCHOOL OF MEDICINE~

Student Name: _____ **Student ID:** _____

Year/Level: _____ **Unit:** _____

Important Information:
- Registration for coursework and/or attendance on the first day of classes is not permitted without full approval of this form.
- Students must enroll in an in-town classroom course or elective/rotation in the first month of re-entry.
- Return from Administrative leave due to USMLE Step 1 readiness is not permitted without Council on Curriculum approval.

Required Documentation and Attachments:
- A current curriculum plan as determined by the Council on Curriculum
- A completed UMKC 'Request for Leave – Return' form

Return date requested:_____

*My signature below confirms my request to return from administrative leave of absence from the UMKC School of Medicine. I understand that my request will not be considered for approval until I complete and attach the additional university request for leave return form **and** until all required leave return forms and paperwork is received by the Council on Evaluation in the School of Medicine. I also understand that any leave granted to me may have financial implications and/or delay my graduation from the program, and that it is my responsibility to review those possible financial implications with the UMKC Cashier's and/or Financial Aid Office(s) prior to submitting this request to return. Finally, I acknowledge that it is also my responsibility to work with my ETC to update and correct my course enrollment in the Pathway system should the school approve my request to return from leave of absence.*

Student Signature: _____ **Date:** _____

Education Team Coordinator Signature: _____ **Date:** _____

Identify all Pathway changes to be made as a result of the leave*: _____
_____
_____

*Please attach a curriculum plan indicating possible changes in the student schedule as a result of the leave.

Docent Signature: _____ **Date:** _____

Comments**:** _____
_____
_____
_____

Date: _____

Council on Curriculum Signature: _____

Comments**:** _____
_____
_____
_____

*********Administrative Use Only**********

Attached Docs: _____Campus Form   _____Curriculum Plan   _____Supplemental Info

Date Received: _____   Date of Campus Submission: _____   New Est. Grad Date: _____   Months Extended: _____

Council on Evaluation Review of Request: _____ Approved   _____ Denied
Comments: _____
_____

Signature of the Chair or Authorized Designee: _____ Date: _____

TECHNICAL STANDARDS
~UMKC SCHOOL OF MEDICINE~

Student Name: _____   **Student ID:** _____

Year/Level: _____   **Unit:** _____

The University of Missouri-Kansas City School of Medicine Technical Standards can be found online by visiting:
http://med.umkc.edu/docs/admissions/Technical_Standards.pdf

From the policy:

Because of our obligation to ensure that patients receive the best medical care possible, certain abilities are required of our students. All students of medicine must possess those intellectual, emotional, mental, and physical capabilities which are necessary to participate fully in the curriculum and which are essential to achieve the levels of competence required by the faculty.

Candidates for the medical degree must demonstrate the ability to work as an effective member of the health care team and must be able to observe and perform a variety of procedures. Intact sensory and motor functioning is required for accurate observation and the competent performance of procedures. Candidates must be able to observe and evaluate a patient accurately, at a distance, and close at hand. This necessitates the functional use of the senses of vision, hearing, touch, and sometimes smell. A candidate must be able to communicate effectively, to hear and to observe patients in order to elicit information, to describe changes in mood, activity and posture, and to perceive nonverbal communications. The candidate must be able to communicate effectively in oral and written form. Candidates must have sufficient sensory and motor function to elicit information from the physical examination by palpation, auscultation, percussion and other diagnostic maneuvers, in a timely manner.

Problem solving is a critical cognitive skill demanded of physicians, and it requires the intellectual abilities of measurement, calculation, reasoning, analysis and synthesis. In addition to these skills, a candidate must possess the high moral and ethical standards demanded of physicians and the emotional health required for full utilization of his or her intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the diagnosis and care of the patients, and the development of mature, sensitive and effective relationships with patients.

Because of the above essential functions, the School of Medicine strongly discourages the use of surrogates to perform these functions as a reasonable accommodation for persons with disabilities. While each application is reviewed individually, it is necessary that each degree candidate himself or herself be able to observe and perform each task required by the curriculum of the school. Similarly, the school does not consider the waiver of required examinations a reasonable accommodation for individuals with learning disabilities. Learning-disabled students, when appropriate,* may be granted additional time on required examinations and may be examined in separate testing facilities or accommodated in other reasonable ways, but they will not be exempted from the requirement to take and pass such examinations. In addition, they will not be provided more opportunities to complete coursework or required examinations than given to the other students. All students must adhere to the course or clerkship syllabus and all of its requirements.

Contact the UMKC Office of Services for Students with Disabilities for information regarding definition and documentation of learning disabilities.

Check the single statement below which applies on the date the form is signed and going forward:

_____I am able to adhere to the Technical Standards stated above at this time, but seek approval for leave from the School of Medicine.

_____I am **unable** to adhere to the Technical Standards stated above at this time, and seek approval for leave from the School of Medicine.

_____I am able to fully comply with the Technical Standards stated above and seek approval to return from leave to the School of Medicine.

Student Signature:_____   Date:_____

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Return from Leave of Absence
OFFICE OF REGISTRATION & RECORDS

Please refer to the leave of absence policy in the UMKC Catalog for further information regarding this process.

Eligibility requirements for requesting a return from a leave of absence:
1. Be physically, mentally and emotionally ready to return to school.
2. Be eligible to register for the term in which you plan to return (no financial, academic or disciplinary holds).
3. Meet all financial aid requirements as outlined by the Financial Aid & Scholarships Office for the academic year in which you plan to return.

Deadline for requesting a return from leave of absence
No later than 30 days prior to the first class date of the semester in which the student plans to enroll.

STEP 1: Student information

Name _____   Date submitted _____

Student ID number _____

Student level
_____ Undergraduate
_____ Graduate: ❑ IPhD   ❑ Other _____   *See your graduate program handbook for specific guidelines.*
_____ Professional: Dentistry, Law, Medicine, Pharmacy

Academic unit (Undergraduate and Graduate)
_____ College of Arts & Sciences
_____ Conservatory of Music & Dance
_____ School of Biological Sciences
_____ Bloch School of Business and Public Administration
_____ School of Computing and Engineering
_____ School of Education

The following academic units have specific policies and procedures for student leaves of absence. Please refer to your program handbook.

_____ School of Graduate Studies
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Academic unit (Professional)
The following academic units have specific policies and procedures for student leaves of absence. Please refer to your program handbook.

_____ School of Dentistry
_____ School of Law
_____ School of Pharmacy
_____ School of Medicine

Requested return from leave of absence:

Term: ❑ Fall   Year: _____
       ❑ Spring
       ❑ Summer

Continue with the signatures on the back of this page.

STEP 2: Meet with the appropriate offices listed below as applicable to your situation.

Were you receiving financial aid or scholarships at the time your leave of absence began? ❑ Yes ❑ No
If yes, then meet with a coordinator in the Financial Aid & Scholarships Office.

Financial Aid & Scholarships
Office signature _____ Date_____

Are you a veteran receiving veterans' educational benefits? ❑ Yes ❑ No
If yes, then meet with the veterans' service coordinator in the Registration & Records Office.

Veterans' services
coordinator signature _____ Date_____

Do you have a balance due on your student account or a hold preventing registration? ❑ Yes ❑ No
If yes, then meet with the Cashier's Office to review your account and registration requirements.

Cashier's
Office signature _____ Date_____

STEP 3: Required signatures

Student signature _____ Date_____

Academic unit
representative signature_____ Date_____

Are you an International Student with an F1 or J1 visa? ❑ Yes ❑ No
If yes, then meet with the International Student Affairs Advising office.

International Student
Affairs advising signature _____ Date_____

STEP 4: Submission of approved form by the academic unit

This form will be submitted to the Registration & Records Office by the approving advisor or body in the academic unit.

For students in the School of Medicine, please also attach the completed change of status form.

Office use only

Student Affairs representative
Are there other outstanding issues to be addressed by the student before a return from leave of absence can be approved?

_____

_____

Registration & Records Office
❑ Approved
❑ Denied: reason for denial _____

Term of student return _____

Processed by _____ Date_____

❑ Notify student of approval or denial.   ❑ Notify academic unit of student's approved return date.
❑ Process return request and note return date in Pathway.   ❑ Scan form into the K REC SECURE drawer in ImageNow.