SMU Department of English
Graduate Studies
Maternity Leave Application Form

To be completed by the graduate student:

Name: ____________________________  SMU ID: ____________________________

Requested for the __ Fall / __ Spring semester of the 20__ — 20__ academic year.

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Please submit this application **no later** than one full semester prior to the requested leave period.

This application, once approved, entitles the applicant to:

- **one** semester of academic leave by which the program clock is “stopped”;
- continued stipend payment for the semester of leave;
- continued student health insurance renewal for the semester of leave;
- continued library privileges for the semester of leave; and
- retention of office space (though the space may be loaned, temporarily, to another graduate student for the semester of leave).

The applicant acknowledges that:

- enrollment in ENGL 8049 is required for the semester of leave;
- maternity leave will be granted only **once** for the duration of the academic program;
- **no extensions** to maternity leave will be granted;
- students will not be funded for any travel/conferences during the semester of leave;
- if grades of incomplete (“I”) are rendered to the student, it is the responsibility of the student to make arrangements with their professors to clear those incompletes; and
- teaching obligations postponed due to the leave must be fulfilled in a future semester.

(Student Signature) (Date)

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To be completed by Department:

Director of Graduate Studies (print)  Signature  Date

Department Chair (print)  Signature  Date

Please submit the completed form to the Assistant to the Chair of the Department of English for processing.

Last updated 11/17/17