# 140 Gortner Lab.

# 1479 Gortner Avenue

# St. Paul, MN 55108-1095

# 612-625-1234

 *www.cbs.umn.edu/plantbio/pbio*

# **Plant and Microbial Biology**

***Graduate Program***

### College of Biological Sciences

## Twin Cities Campus

#### University of Minnesota

*\*\*\*NOTE: In situations where a student is in a crisis or emergency, the advisor may complete this memo in consultation with the DGS on behalf of the student. The advisor and DGS must consult with the student and revise this plan when the student is back in communication with the graduate program.\*\*\**

TO: Dr. Meg Titus, Associate Dean for Graduate Students and Postdocs

College of Biological Sciences

THROUGH: Dr. X, Director of Graduate Studies

 X Graduate Program

FROM: Dr. X, assistant professor

 Department of X

 and

 Student name

X Graduate Program

DATE: August 11, 2023

SUBJECT: Leave of absence plan for Student name

**I request a leave of absence during (term(s) and year) for the purpose of (general reason for LOA). I am to return to my degree program in (term and year).**

**Degree progress to date:** (Outline the degree requirements that you have completed.)

**LOA plan—points to consider and include in the memo:** *(This is a guide, not a prescribed or exhaustive list of points to include in a LOA plan.)*

* 1. When your leave will start?
	2. When it will end?
	3. What will be done during the leave? [e.g., addressing medical or mental health issues, handling a family issue, taking time for personal growth, participating in a long-term professional development opportunity (e.g., teaching at a local college for a semester). Note that you do not need to share deeply personal details.]
	4. What are plans for pausing your research project and picking it back up? Is someone carrying the project along? Is it easy to stop because it’s your project and your project alone?
	5. Have you arranged for health insurance?
	6. Have you put the pay/stipend/tuition benefit on pause and for how long?
	7. What are benchmarks for indicating you are ready to come back (completed an external teaching assignment, completed/made progress with therapy, etc.)?
	8. What are the plans for your funding (assistantship/fellowship, tuition, health insurance) upon your return to the program? (Advisor or program must affirm that they will resume support and that the student will have funding to the end of their program when they return.)
	9. When will you connect with your advisor or program during the course of your leave? (At the very least, set a plan to connect a month before the end of your leave.)
	10. What will your return to the program and lab entail? (Which program requirements do you still need to meet? What is the general timeline for meeting those? What support system for advising and mentoring will be in place?)
	11. Are you requesting a leave of absence with health insurance benefits? (If so, note also that you need to provide a letter from your provider. See the [medical leave of absence guidance](https://cbs.umn.edu/sites/cbs.umn.edu/files/public/downloads/LOA_with_Health_Care_Benefits.pdf).)

Additional point to consider and include in a revised memo upon your return from leave:

* Set meetings for a 3-month and 6-month post-return review with your advisor and the program DGS and GPC to ensure you have ongoing support for a successful return to the program.

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DGS comments:

Associate Dean comments: