

Study Period (USMLE, RLRA, NBME, CCSE, Schedule Gap) or Leave of Absence (Personal, Medical, Financial) Request Form

Any extended absence (thirty days or more) from either Basic Science or Clinical Medicine education at the Medical University of the Americas requires formal approval and verification from the respective Dean. All such absences are noted in the student's permanent record. Study Periods do not preclude USMLE exam requirements.

Last Name:	
First Name:	
Date:	
Email Address:	
Phone Number:	
Matriculation Date:	/ /
Basic Science Completion Date:	<input type="checkbox"/> April <input type="checkbox"/> August <input type="checkbox"/> December
Passing USMLE Step I Date:	
Passing USMLE Step I Score:	
Step 1 Attempt:	<input type="checkbox"/> No <input type="checkbox"/> Yes
Step 2 CK Attempt:	<input type="checkbox"/> No <input type="checkbox"/> Yes
Passing USMLE Step2 CK Score:	<input type="checkbox"/> No <input type="checkbox"/> Yes
Step 2 CS Attempt:	<input type="checkbox"/> No <input type="checkbox"/> Yes

Study Period Reason		Leave of Absence Reason	
From: ___/___/___ To: ___/___/___ <small>(Month/Day/Year) (Month/Day/Year)</small>		From: ___/___/___ To: ___/___/___ <small>(Month/Day/Year) (Month/Day/Year)</small>	
USMLE Step 1		Financial	
USMLE Step 2		Medical	
RLRA		Personal	
NBME retake		Other	
CCSE			
Other			

Explanation: _____

Signature: _____ Date: _____

For MUA Official Use Only			
Study Period		Leave of Absence	
USMLE Step 1		Financial	
USMLE Step 2		Medical	
RLRA		Personal	
NBME retake		Other	
CCSE			
Other			

Date: ___/___/20___