

YALE UNIVERSITY

REGISTRAR

GRADUATE SCHOOL OF ARTS AND SCIENCES

ASSOCIATE DEAN

Registration In Absentia Request Form

This form is to be completed <u>only</u> by Ph.D. students who have not satisfied the Graduate School's four year, full-tuition obligation.

Students are normally expected to register in residence; registration in absentia may be permitted for students who are current with all Graduate School and departmental requirements and have compelling academic reasons to study off campus for a term or a year. Permission to register in absentia does not exempt you from the three-year minimum residence requirement for the Ph.D.

To request registration in absentia, complete the top portion of this form, obtain your DGS' recommendation (below), and submit the form to your associate dean *not less than one month before* the beginning of the term in which you wish to begin study in absentia. Be sure to consult Member Services at the Yale Health Plan about your health insurance needs while you will be off campus.

To be complete							
Name:				_	SID:		
Last		First					
Department:					Year of S	tudy (current): _	
Term: □ Fall	☐ Spring	Year:					
Mailing Address:							
	Street			City		State Zip	Code
Email:					Phone: ()	
Effective Dates for	this address:						
		From		То			
Advisor's Name ar	nd Campus Teleph	none:					
I wish to register in	n absentia during:	Term	: □ Fall	□ Sprina	Year:		
Place of Study:	· ·						
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