

**FORM: REQUEST FOR GRADUATE PROGRAM LEAVE OF ABSENCE**

Initiated by: ☒ Student ☐ Graduate Program

FULL NAME: Audrey Moon Perry

Evergreen student number: A 00154533

Contact information:

Email: moonperry@gmail.com

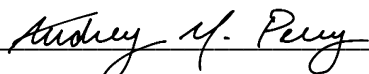
Phone: 360-259-2837

Mailing Addresses: 2711 Fir Street SE, Olympia, WA 98501

Quarter last enrolled: Summer 2022

Reason for leave of absence from graduate program: I took a new job with new responsibilities, more hours, and a longer commute, making completing coursework difficult. After the first year it might get easier.

Proposed quarter to return: Fall 2023

Signature: 

Date submitted: 8/8/2022

---

Current Academic Standing: \_\_\_\_\_

AD review completed: \_\_\_\_\_ Decision: \_\_\_\_\_

Director review completed: \_\_\_\_\_ Decision: \_\_\_\_\_

Returning student review committee review completed: \_\_\_\_\_ Decision: \_\_\_\_\_

Documented in SPACMNT in Banner: \_\_\_\_\_