

NEW YORK INSTITUTE OF TECHNOLOGY

College of Osteopathic
Medicine

COMPLEX II LEAVE OF ABSENCE 2025-2026

COMPLEX LEVEL 2 LEAVE OF ABSENCE

Students who do not demonstrate readiness for, or who are not successful in passing COMPLEX Level 2 by the end of year four, will be required to take a COMPLEX LOA to prepare for the COMPLEX Level 2 exam. Passing COMPLEX Level 2 is a requirement for graduation.

1. The student must complete and sign the appropriate Request for a Leave of Absence form available on the Student Resources page of the COM website. The completed request form signed by the student must be returned to the appropriate office by the student. The form, including the appropriate departmental signatures, will be processed by the Office of the Registrar.
2. Before a student will be reinstated from any leave, a Request to Return from a Leave of Absence form, which can be obtained from the Student Resources page of the COM website must be completed, signed by the student, and returned. The form, with all of the appropriate departmental signatures, will be processed by the Office of the Registrar. For a Medical Leave of Absence, the student must submit a medical clearance from their physician. NYITCOM may also request a medical clearance from a physician chosen by NYITCOM prior to approving the Return from a Leave of Absence form.

Please note:

- A student's *Request for a Leave of Absence* form will not be approved and processed until any pending grade has been posted.
- Any student on a leave of absence is considered *enrolled not attending* for insurance purposes.
- A leave of absence cannot exceed six months in any academic year for financial aid purposes.
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Please note:

- A student's Request for a Leave of Absence form will not be approved and processed until any pending grade has been posted.
- Any student on a Leave of Absence is considered enrolled not attending for Insurance purposes.
- A Leave of Absence cannot exceed 180 days in any 12-month period for financial aid purposes.
- The student is not eligible to apply for or receive any Title IV Financial Aid, which includes Direct Stafford Loans, Direct Grad PLUS Loans, for the tuition, fees or living expenses for the billing period that the student had paid for in the previous year.

By signing below, I agree that I have read and understand the COMPLEX II policy located in the 2025-2026 Student Handbook including all addendums and that I have received a copy of this form.

Student signature: _____ Date: _____

Full Name (printed): _____

Leave Dates: _____ Class of: _____

Student ID#: _____

Telephone: _____

Email: _____

Current Mailing Address: _____

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Please initial the following:

Return from Leave of Absence Policy:

_____ I am aware the Request to Return from Leave of Absence form must be received prior to my scheduled return

General Information

If your account is not paid when due, it may be forwarded to an outside collection agency or attorney. At that time, you will be responsible for paying NYIT all of the costs associated with the collection of your delinquent account, which includes the payment to NYIT of the principal sums due plus additional costs. Additional costs may include, but are not limited to, collection agency fees constituting 33% of the principal balance due if NYIT engages a collection agency to secure payment. If NYIT engages legal counsel to secure payment, additional costs may include legal fees constituting 50% of the principal balance due, plus all other costs associated with collection of the delinquent amounts. All collection matters shall be governed by New York law. The courts of New York shall have exclusive jurisdiction in these matters.

Student signature: _____ Date: _____

ADMINISTRATIVE SIGNATURES AND APPROVALS

Financial Aid: _____ Date: _____

Student Health Insurance: _____ Date: _____

Clinical Education: _____ Date: _____

Associate/Assistant Dean of Student Administration _____ Date: _____

SPC Meeting Date _____

Leave Start Date: _____ End Date: _____

Graduation Date: _____

DATE BY WHICH EXAM MUST BE TAKEN: _____