Vivekananda Yoga University
World's 1st Yoga University Outside India

ADDENDUM B

STUDENT STATUS CHANGE REQUEST (SSCR) FORM

NAME: _____
FIRST MIDDLE LAST

TODAY'S DATE _____ EMAIL _____

CELL _____ HOME PHONE _____

CURRENT TERM _____ EXPECTED DATE OF GRADUATION _____

DATE OF BIRTH _____ LAST 4 DIGITS OF SSN _____

I would like to request change of my status from (check one):

☐ Active Student status to an Inactive student[1] status from _____ Semester

☐ Inactive Student status to an Active student status from _____ Semester

Please briefly explain the circumstances for this Status Change Request.

_____

_____

_____

_____

_____ _____ _____ _____
SIGNATURE OF STUDENT DATE (MM/DD/YYYY) PARENT/LEGAL GUARDIAN (APPLICANTS UNDER 18) DATE (MM/DD/YYYY)

15311 Pioneer Blvd. Los Angeles, CA 90650
www.vayuusa.org
Phone: (747) 228-2987
registrar@vayuusa.org

[1] Students can request a leave of absence due to personal circumstances for the duration of a maximum of 2 consecutive semesters. Then the student is moved to Inactive status and is expected to resume their studies towards a degree upon their return to Active student status. During the period when a student is in Inactive status, the student will not pay any fees. See Section 19.9 of the VaYU School Catalog for more information.

_____ STUDENT _____ ADMISSIONS REPRESENTATIVE _____ SCHOOL OFFICIAL