Youth Leadership Academy
Leave of Absence Request

I _____, hereby request a leave of absence from NYA and the Youth Leader Program for the following reason(s):

_____
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_____

I understand that my request for a leave of absence puts me on "Inactive" status, and that if I remain on inactive status for a period of 3 months, I will be removed from the Youth Leader Program. I also understand that if I am removed from the program but wish to return, I must submit a written request stating why I should be reconsidered for the Youth Leader Program.

_____ _____
Youth Leader Signature Youth Leadership Academy Supervisor Signature

_____ _____
Date Date