



UNIVERSITY OF
DENVER

Center for Academic and Career Development
2050 E Evans Ave, Suite 30
Denver, CO 80208
303.871.2455
Fax 303.871.3331

TO THE HEALTH PROFESSIONAL

You are currently treating a student at University of Denver who wishes to return from a medical leave of absence. We are asking you to write us a letter and provide the information below so that we can determine if the student has recovered sufficiently to resume full-time academic coursework. We also ask that you fill out the brief attached questionnaire regarding your treatment of the student and any continued care recommendations. Please return the letter and questionnaire to

Lisa Matye Edwards
University of Denver
2050 E. Evans Ave, Ste 30
Denver, CO 80208
303.871.3331 (fax)
303.871.2455 (phone)
lmedward@du.edu

Thank you for your help. Please contact Lisa Matye Edwards with questions.

Check List

- Please write the letter on office letterhead.
- Describe the problem(s) that led this student to take a medical leave of absence, including diagnoses.
- Provide your opinion as to whether the student is able to return to the University of Denver as a full-time student.
- List any medications you have prescribed for this student, any side effects that may affect the student's ability to attend and complete classes, whether any prescribed medications need to be monitored, and name of treatment provider monitoring this medication.