

# Pregnancy Disclosure Policy

## I. Policy Statement

A student who foresees any educational issues related to pregnancy is strongly encouraged to notify the program director/department chair as soon as possible. By doing so, the student and the program director/department chair can collaborate and develop an appropriate plan for the continuation of the student's education. In light of the unique nature of each program, as well as particular challenges the student may face while pregnant or when recovering from childbirth (e.g., missed classes, make-up work, etc.), these options will vary. The choice to declare a pregnancy is voluntary, and a student is not required to disclose this information to the University.

## II. Options After Disclosure

Once a student has voluntarily decided to disclose a pregnancy to the University, the student will have several options, as described below.

### 1. Continue in the program

- If a student decides to continue in the program and desires to have any adjustments to her academic program due to the pregnancy, the student should contact the program director/department chair to discuss any reasonable adjustments that may be necessary to continue in the program. Such adjustments, if any, will be documented in the form in Addendum A which will be signed by both the student and a University representative.

### 2. Request a leave of absence

- A leave of absence due to pregnancy may be for various amounts of time depending on a student's particular circumstances. Such a leave may be extended if deemed medically necessary by the student's doctor.
- Due to the structure of some programs, the timing and/or length of a student's leave of absence may result in the student being required to re-take or finish course(s) in a future term.
- If taking a leave of absence due to a pregnancy, the Education Plan in Addendum B will be discussed and signed by the student and a University representative.

### 3. Withdraw from the University

- The student may, in the student's sole discretion, determine that student must withdraw from the University for an indefinite period of time or permanently due to pregnancy. Normal University withdrawal procedures, and readmission procedures (if applicable), apply.

## III. Questions or Concerns

A student who has questions about this policy or who is concerned about its implementation, should contact the Title IX Coordinator.

**Addendum A**  
**Continuation in Program after Disclosing Pregnancy**

I. Acknowledgements

By signing this form, [INSERT STUDENT NAME] (“Student”) acknowledges the following:

- Student has voluntarily disclosed pregnancy to MidAmerica Nazarene University and intends to continue pursuing degree in the University’s [INSERT PROGRAM].
- Student understands there are other options available, including taking a leave of absence.
- Student understands there are potential risks to student and/or the baby by continuing on in the [INSERT PROGRAM]. The University has advised Student to consult with Student’s doctor to discuss these potential risks.
- Student assumes all responsibility related to these risks and any resulting losses or costs, including medical treatment and costs thereof.

II. Adjustments to Program

[In this section, describe any adjustments that have been discussed and will be implemented based on the student’s pregnancy. Note if there have been no adjustments implemented at the time of signature.]

A.

B.

C. Student may request additional modifications at any time by contacting the program director/department chair.

**The University and Student do hereby agree to the above.**

\_\_\_\_\_  
[INSERT NAME], Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
[INSERT NAME], [INSERT POSITION TITLE]  
MidAmerica Nazarene University

\_\_\_\_\_  
Date

## Addendum B Education Plan for Pregnancy Leave

MidAmerica Nazarene University (University) and [INSERT NAME OF STUDENT] (“Student”) have agreed to the following conditions related to the Student’s leave of absence related to pregnancy. Student’s leave of absence is scheduled to begin on [INSERT DATE] and student is anticipating a return to school [INSERT DATE OR TERM]. Student and the University acknowledge that Student may take a longer leave if it is deemed medically necessary by Student’s doctor, and the parties agree to meet and discuss this Education Plan if that occurs.

### I. Academics

[In this section, discuss where Student currently stands academically, what adjustments to Student’s courses/degree track will be necessary because of the leave of absence, what classes student will be enrolled in upon return, etc.]

- A.
- B.
- C.

### II. Financial Aid/Scholarships

[In this section, discuss current financial aid/scholarship/funding situation and any implications from taking leave.]

- A.
- B.
- C.

### III. Additional Matters

[In this section, discuss any additional matters that are relevant to a particular situation. Among other things, consider including if a student must meet any specific requirements to be readmitted (e.g., Upon expiration of Student’s leave of absence her readmission is guaranteed, provided student ... [insert specific reasonable requirements, as appropriate]).

- A. Student agrees to contact [INSERT APPROPRIATE PERSONNEL] \_\_\_\_\_ [days/weeks/months] in advance of return in order to ensure a smooth transition back to school.
- B. Student will not be required to pay any application or readmission fees related to her readmission to the institution.
- C.

**The University and Student do hereby agree to the above.**

\_\_\_\_\_  
[INSERT NAME], Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
[INSERT NAME], [INSERT POSITION TITLE]  
MidAmerica Nazarene University

\_\_\_\_\_  
Date