**Date: \_\_\_/\_\_\_/\_\_\_\_**

**Doc #:**

**REQUEST FORM for SUSPENSION from the STUDIES**

I am …………. (Student ID number), I belong to the Institute’s …………………………………………………………………. Department, ………………………………………………….……. Master / PhD Program. I would like interrupt my studies (suspending my right for education) due to the reason given below.

Yours sincerely,

Student’s name and surname

Signature

**THE REASON FOR SUSPENDING THE STUDIES:**

Military service

Overseas assignment by the employing institution

Receipt of a research scholarship or to learn a foreign language on my own expense

A health report from a fully equipped/qualified state or university hospital

Other:……………………………………………………………………………………

………………………………………………………………………………………........

**\*Please document the reason for the suspension.**

APPROVED APPROVED

……/…../20…. ……/…../20….

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Department head Supervisor