**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….

……………………………… ……………………..

 Department head Supervisor