



Application for termination of enrollment

		ID number	·:		
1.	Family name, given name(s)		Date of birth		
2.	Reason for termination (see key below, enter relevant no.): key: Studies completed, exams passed Studies completed, exams not yet passed Termination without exams because unable to take exams Change of university Enlistment to military or community service Abandonment or interruption of studies Termination after failed exam with no option to re-sit/ right of admission to exam lost Other reasons I hereby request termination of my enrollment: Year				
0.	-	summer semester (30 Sept.)	-		
	at the end of the winter semester (31 March)		/		
	effect as of: (dat	e)			
		_	Day	Month	Year
4.	Without this endorseme in person, please send	ry endorsement: all materials returner to the tend (stamp) we cannot terminate your enrollment! If you this completed and signed form to: UB; Leihstelle, I brward the form to the student administration office.	ou are unabl	e to visit the	
5.	If you wish for your certificate of deregistration as a student to be sent to you by mail, please give your full address:				
	Street name and number				
	Postcode and town				
	Place, Date	Student's signature			