

Full Name and Academic Title:

Date of Birth: Place of Birth:

Contact Address:

Phone Number: Student ID (from STAG):

Field of Study (Abbreviation): Year of Study:

NOTIFICATION OF WITHDRAWAL FROM STUDIES

I hereby notify that, in accordance with § 56, paragraph 1, letter a) of Act No. 111/1998 Coll., on Higher Education Institutions and on Amendments and Supplements to Other Acts, as amended, I am withdrawing from my studies at the Faculty of Informatics and Management, University of Hradec Králové.

I acknowledge that the date of termination of studies is the date on which the written notice of withdrawal is delivered to the university or the faculty where the student is enrolled.

I confirm and solemnly declare that I have settled all obligations towards the university.

Note: It is necessary to return all borrowed books and equipment from departments and the library, sports equipment, study materials, borrowed items from dormitories, storage, or other university facilities. If your studies are connected to participation in student organizations, the faculty or university senate, committees, or other associations, you must inform them of your withdrawal from studies.

I request the issuance of a transcript of completed courses (please mark): ANO NE

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Date

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Student's Signature