

Name and surname: _____

Address incl. ZIP code (post code): _____

Phone: _____ Email: _____

University ID: _____ Field of study: _____

Type of study (bachelor/master): _____

Year of study: _____

NOTIFICATION OF DROPPING OUT THE STUDIES

I announce that pursuant to Section 56 (1) (a) of Act No. 111/1998 Coll., on Higher Education and on the amendment of other acts, as amended, **I drop out my studies.**

I acknowledge that the date of termination of my studies is the date, on which this notice is delivered to the PŘF UHK.

I require to send a certificate of my studies and an overview of the subjects completed:

YES **NO*)**

*) Mark

.....

date

.....

student's signature