

Notice of termination of student status at Semmelweis University

Surname:	Given name:
Neptun ID:	Date of birth:
Temporary address:	
E-mail address:	

I hereby declare the termination of my student status at Semmelweis University.

I acknowledge that the termination is effective immediately (as of today) and is irrevocable. If I wish to resume my student status at the University, the standard admission rules will apply.

I understand that this form must be printed and signed by hand and submitted to the Directorate of International Studies.

Act CCIV of 2011 on National Higher Education, PART FOUR - STUDENTS, Chapter XV LIABILITY OF STUDENTS, TERMINATION OF STUDENT STATUS, 35. Termination of student status, Article 59, "(1) Student status shall be terminated" "b) if a student gives notice of termination of student status, on the day that the notice is given,"

Date:

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Signature