Application for Leave of Absence

To
Student Support
Münsterstr. 156
Building 2, floor 1
40476 Düsseldorf

Family name:_________________ First name:___________________
Student ID no.:_____________ Study programme:_____________

I request leave of absence for the winter / summer semester 20_____ due to:

☐ medical grounds (doctor’s certificate confirming that you are unable to study)
☐ pregnancy (copy of your maternity notes)
☐ child raising
  (for a child up until its 8th birthday which is raised jointly by both parents
  in the same household, documented by the child’s birth certificate and certificates
  of registration from the Einwohnermeldeamt (residents registration office) for the
  applicant and the child)
☐ completion of voluntary service
  (please produce a corresponding certificate)
☐ internship (certificate from the Examination Board)
☐ care and support of relatives (evidence of care activities)

You must submit corresponding evidence of the reason for leave of absence together with
this application.

Düsseldorf, date:_________________ Signature (student):___________________

________________________________________________________________________

Leave of absence approved on:_____________ Signature (administrator):_____________

Please note: Please complete the German form. This English translation is intended to allow
English-speaking students a better understanding of the document. It is solely for information
purposes and only the German version is legally binding.