Poznań, dnia ...........................................

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Student ID No

...........................................................................................

Name and surname

..........................................................................................

Semester, Year

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Field and level of study

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Field and level of study

**Vice Dean for education of**

**FACULTY OF COMPUTING AND TELECOMMUNICATIONS**

**APPLICATION FOR LEAVE FROM CLASSES**

I would like to kindly request permission for me to leave from classes until the end of the winter/summer semester(\*) of the academic year 20…./20….

Explanation: ……………………………………………………………………………………. ………………………………………………………………………………………...…………

………………………………………………………………………………………...…………………………………………………………………………………………………..…………

.........................................................

date and signature of the student

**Caution:**

The student cannot obtain leave for the past period.

**DECISION**

Based on § 29 of the Study Regulations of full-time and part-time first and second cycle and long-cycle studies passed by the Academic Senate of Poznan University of Technology in Resolution No. 42/2020-2024 of 31 May, 2021, **I agree / do not agree**()\* to the above leave from classes until ………………………………………………………..

Poznań, ....……………………. …..…………………………………….

stamp and signature

(\*) Delete where not applicable