**DECLARATION OF WITHDRAWAL FROM STUDY**

I, the undersigned, ………………………………………, date of birth (dd.mm.yyyy)……….., in accordance with the section 56 (1) (a) of Act No. 111/1998 Coll., on Higher Education Institutions and on Amendments and Supplements to some other Acts, **hereby declare that I withdraw from my study** at the Faculty of Science, Charles University, in the study program…………………………………………………………………………………………………………………………………………………………………………………………………………………………..………………………….……………………………………….

I acknowledge that after withdrawing from study I am obligated to return the borrowed books to the relevant library and to settle any further obligations towards Charles University.

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 Date Signature of student

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This declaration form has to be delivered to the Student Affairs Division in written form either in person, by post to the following address: Faculty of Science, Charles University, Study Program, Albertov 6, Praha 2, 128 00, or handed in at the mail room of the Faculty. The study is terminated on the day the statement is delivered to the faculty. This date will then be displayed in the SIS informational system. A confirmation of the period of study will be issued upon the student’s request by the Department of Student Affairs/ Department of Doctoral Studies.