University of Arts zui Linz strus Arts zui Linz

REQUEST FOR LEAVE OF ABSENCE

Name	student-ID
Address	phone number
Study programme	
I request a leave of absence for the	
Winter semester summer semester	
§ 67. (1) Students can apply for one or max. two semesters	due to
☐ 1. completion of military service, training or civilian service	or
\square 2. illness that demonstrably hinders the progress of studie	es or
☐ 3. pregnancy or	
\square 4. childcare obligations / other similar care obligations or	
\square 5. the completion of a Voluntary Year of Social Service or	
☐ 6. temporary impairment in connection with a disability.	
Other reasons set out in the university statutes:	
$\ \square$ 7. implementation of artistic/scientific projects (no studies	3)
8. serious reasons hindering studies	
(2) The following applies to leave of absence: 1. leave of absence must be applied for no later than the beginning of the resp. 2. In the event of unforeseen and unavoidable occurrence of a reason for leave leave of absence may also be applied for during a semester. 3. academic achievements completed up to the time of the leave of absence examinations) remain valid.	ve of absence pursuant to para. 1 (2) to (4) and (6),
(3) The leave of absence is effective for all studies at the educational institut jointly established studies, for all studies at the participating educational instit During the leave of absence, admission to the degree program remains valid. the submission and assessment of academic and artistic work is not permitt	tutions. Participation in courses, taking examinations and
I acknowledge that the student fee (ÖH fee) for semesters on leave of ab	sence must be paid in any case.
Date	Student's signature
Enclosure: Current study sheet Proof of justification	
The above request is granted / not granted.	
Date	For the rectorate