

## Application for a semester of leave

Enrolment no.: \_\_\_\_\_

Last name: \_\_\_\_\_

First name: \_\_\_\_\_

Studies:  BA Contemporary Dance     MA Movement Research     MA Dance Pedagogy  
 Academy for Contemporary Dance & Ballet (AZB)

Enrolled in the \_\_\_\_ semester

I request leave of absence in the winter semester \_\_\_\_\_ /summer semester \_\_\_\_\_

I acknowledge that in order to continue my studies, I must re-enrol by transferring the tuition fee on time, usual deadlines apply. Otherwise, further enrolment is not possible.

**IMPORTANT: the current ÖH fee + insurance must still be paid for the semester on leave!**

(Exception: no ÖH fee + insurance is due for AZB)

Reason:

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Place, date

Signature student

(Legal representation for minors)

The following signatures must be obtained from the student before submission:

1. MAJ-Lecturer: \_\_\_\_\_

2. Institute Director: \_\_\_\_\_

3. Library: \_\_\_\_\_

To be carried out by Student Service:

Approval Dean: \_\_\_\_\_