



FACULTY OF SOCIAL SCIENCES

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Department of Sociology

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Application for discontinuation of programme studies

Form with fields: Name (first and last), Personal identity number, Street address, postcode and city, E-mail address, Phone, I am admitted to (programme)

Reason for discontinuation of your studies: _____

Desired date of discontinuation: _____

Date

Student's signature

To be filled in by the department:
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