



**LUNDS**  
UNIVERSITET

Diarienummer \_\_\_\_\_

Department of Human Geography

**APPLICATION FOR INTERRUPTION OF STUDIES**

Name: \_\_\_\_\_

Civic Registration Number: \_\_\_\_\_

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_

City/Country: \_\_\_\_\_

Contact phone number: \_\_\_\_\_

E-mail: \_\_\_\_\_

I hereby certify that I would like to interrupt my studies and be de-registered from  
(programme): \_\_\_\_\_

from the date (year-month-day): \_\_\_\_\_

I acknowledge that I lose my place after my interruption of studies is registered.

I am aware that in case I wish to continue my studies I must send a new application  
and be admitted again.

I hereby certify that I would like to interrupt my studies and be de-registered from the programme courses which I have not completed during the time when I was active on my programme (course code, course name):

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\_\_\_\_\_  
Date (year-month-day)

\_\_\_\_\_  
Applicant's Signature

The de-registration is reported to the register of student records (Ladok)  
on (year-month-day) \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
by (name, title, signature)\_\_\_\_\_