

Name and surname:

.....

Year of study:

.....

Date, month, year of birth:

.....

Study programme:

.....

Central ID number:

(i.e. number below your photo on the CU Student Card)

.....

Delivery address:

.....

## Statement - Withdrawal from Studies

**Herewith I declare that I am withdrawing from my studies at Faculty of Mathematics and Physics, Charles University.**

.....

Date

.....

Signature

Delivery date of the statement (to be filled out by Students Affaires Department): .....

Dean's decision:

In Prague .....