

Eingangsstempel der Hochschule

To  
Hochschule Ravensburg-Weingarten  
Admission Office  
Doggenriedstraße  
88250 Weingarten

Contact:  
Admission Office  
Phone: 0751/501-9344  
Email: info@rwu.de

## APPLICATION FOR A SEMESTER OF LEAVE

(Applications have to be submitted before the start of the lecture period.)

**Please note:** The semester of leave can only be processed, if you are already re-registered for the respective semester. Therefore, please note the official re-registration period.

.....  
Surname, First Name

Date of Birth

Study Program/ Student ID No.

I hereby request a semester of leave for the  Winter 20...../  Summer 20..... .

Reason:

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Proof: Further documents  are attached.  will be submitted later.

History:  First semester of leave.  ..... (number) semester of leave.

\_\_\_\_\_  
Place/ Date

\_\_\_\_\_  
Signature

Bearbeitungsvermerke (to be filled in by Hochschule Ravensburg – Weingarten only)

**1. Hardship/ Deadline:**  yes  no

Signature Examination Office/ Date

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**2. Semester of leave is supported.**

Signature Dean/ Date

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**3.a Semester of leave is approved.**

Signature Vice-Rector/ Date .....

**3.b Semester of leave is not approved.**

Reason: .....

.....

Signature Vice-Rector/ Date .....

**4. Approval Note is sent.**

Signature Admission Office/ Date .....