

To the Dean  
of the Faculty of Chemistry and Pharmacy  
Am Hubland  
97074 Würzburg

Vor- und Nachname
Straße Ha
Postleitzahl Ort
Mobilfunknummer (Angabe freiwillig)
E-Mail-Adresse
Matrikelnummer:
Ort, Datum

**Interruption / Leave of Absence - Doctoral Studies**

Dear Dean,

I hereby declare an interruption of my doctoral studies. Concerning the total time of my doctoral procedure I ask you for leaving out the stated time interruption because I'm not able to perform any work regarding my dissertation during this time period.

Start of Interruption (dd.mm.yyyy)	DaDD
End of Interruption (dd.mm.yyyy)	d

Reason for Interruption (if appl. verification)	Grund
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Supervisor	Prof. Dr.
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If I'm currently enrolled I apply for a leave of absence at Unit 2.2 (Student Affairs) in time.  
Information:

<https://www.uni-wuerzburg.de/en/studying-at-jmu/studienangelegenheiten/leave-of-absence/>

Regards

Consent Supervisor

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original signature applicant  
(first name / last name)

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original signature