

Name: .....

Date: .....

To Dr. habil. Lívia Fülöp Ph.D.  
Head of the Academic Board

My name is ....., and I would like to interrupt my studies at the University of Szeged, Albert Szent-Györgyi Medical School and request that my student status be passive in the ..... (1<sup>st</sup>/2<sup>nd</sup>) semester of the 20...../20..... academic year.

I wish to resume my studies in the ..... (1<sup>st</sup>/2<sup>nd</sup>) semester of the 20...../20..... academic year.

Yours sincerely,

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signature