

APPLICATION FOR APPROVED LEAVE FROM STUDIES

	Personal identity number:					
Street address:						
Postcode, town/city:	Phonenumber:					
Enrolled in programme:						
Email:						
School: School of Health and Welfare		unication Interna	ational	School of Engineering		
I previously been granted leave?	Yes	Period:				
r approved leave from - to:						
Reason Parental leave (certificate must be presented Illness (certificate must be presented)	d)	Other special rea	ason			
Supplementary exams:			Programn 	ne director/course coordinator		
	Postcode, town/city:	Postcode, town/city:	Postcode, town/city:	Postcode, town/city:		

The student is responsible for finding out the date and time of and registering for any supplementary exams.

Intended date of resum	ption:					
The student must give r	notice of the date of resumption no la	ater than:				
Other points agreed:						
Place and date						
Student		Programme director/study co	ounsellor			
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Decision						
Application	Approved	Denied				
Statement						
of reasons						
Place and date						
Decision maker's signa	ature					
Send the application to)	A copy of the decision will be sent to:	<u>Date/signat</u> ure			
Registrator School (specify)		student course coordinator/				
Box 1026		programme director				
551 11 Jönköping		concerned				

Notice of resumption of studies

The student must notify the Academic Administration of his or her resumption no later than the above agreed date. If the student does not give such notice, the university reserves the right to deregister the student. Unless there are special reasons, leave from studies is granted for a maximum of one (1) year. Only students who are enrolled in a programme may be granted leave from studies. It is on the student to notify the Swedish Board of Student Finance (CSN) of the approved leave.

Ladok administrator

registrar study counsellor

How to appeal

Sweden

The decision may be appealed to the Board of Appeals at Jönköping University (HJÖN). The appeal must be in writing and reach HJÖN (Jönköping University, Överklagandenämnden, Att: Hans Rudberg, Box 1026, 551 11 Jönköping, Sweden) no later than fourteen (14) days from the date of the decision. The notice of appeal must state which parts of the decision are appealed against and specify the change sought by the appellant as well as the grounds for the appeal.