



NOTIFICATION FOR EXTENDING THE TIME TO COMPLETE A DEGREE

Surname and first names:	
Student number:	
Address:	
E-mail:	Telephone:

I notify of the need to for extending the study time in the following right to study of the University of Vaasa:

School:	
Degree:	Year of enrolment:
Major subject / Programme:	

Reasons for non-attendance (attach the certificate of stating the reason for absence) :
<input type="checkbox"/> General military service, from: ___/___ 20___ to: ___/___ 20___
<input type="checkbox"/> Voluntary military service, from: ___/___ 20___ to: ___/___ 20___
<input type="checkbox"/> Maternity or paternity leave, from: ___/___ 20___ to: ___/___ 20___
<input type="checkbox"/> Parental leave, from: ___/___ 20___ to: ___/___ 20___

Date and signature: _____

Student and Academic Services fills:
<input type="checkbox"/> Extension is granted.
<input type="checkbox"/> Extension is denied. Explanation: _____ _____
Signature: _____

This form and attachments will be returned to edusys@uwasa.fi