

**STUDENT STATEMENT ON THE WITHDRAWAL FROM THE UNIVERSITY OF
PRIMORSKA, FACULTIES OF MATHEMATICS, NATURAL SCIENCES AND
INFORMATION TECHNOLOGIES**

The undersigned (name and surname) _____, born (write the date of birth) _____, enrollment number _____, enrolled in the (circle) 1st year / 2nd year / 3rd year / 4th year / pregraduation year (circle) of the undergraduate / postgraduate study program (write the name of the study program):

I declare that on my own request I want to withdrawal from my studies at the Univeristy of Primorska, Faculty of Mathematics, Natural Sciences and Information Technologies.

I am aware that with the withdrawal from the University of Primorska, Faculty of Mathematics, Natural Sciences and Information Technology in accordance with the third indent of Article 171 of the Statute of the University of Primorska, **my student status ceases and I am no longer entitled to rights and student benefits defined in Article 69 of the Higher Education Act and that I must inform all institutions where I have used the student bonuses obtained from the student status about the termination of my student status.**

I undertake to settle all financial obligations to the University of Primorska, the Faculty of Mathematics, Natural Sciences and Information Technology before the withdrawal.

(place and date)

(student's signature)
