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| **Notification of withdrawal from programme at DSV**  **(Only for the Department of Computer and Systems Sciences. Other students: contact your own department)** | |
|  | Send the form to:  Student Affairs Office  DSV Postbox 7003  164 07 KISTA |
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Personal information  
First name:       Surname:

Personal P- or T number:       E-mail:

Address:

ZIP-code and City:       Country:

Information about studies  
Programme:

Year of admission:

Date of withdrawal\*(from which the withdrawal shall apply):

\*Note! The form must be received by DSV within 15 working days from the date of withdrawal.

The reason for the withdrawal: (optional)

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Date Signature

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Notes from DSV:

Date of arrival: Diarie-number: