

Application for Deregistration

(This application will only be accepted with your original signature. No scan, no fax, etc.)

☐ at the end of _____ semester 20____/____or
☐ on _____ (Warning: Your health insurance cover will expire as of this date)

Surname, first name: _____

Course of study: _____

Student number: _____

(or your date of birth)

Your current postal address: _____

Reason for deregistration:

☐ Change of university

☐ Transfer within the university to the following

☐ Abandonment / hiatus

course of study: _____

☐ Other reasons: _____

Place, date _____

Signature _____

One of the following two options must be correctly and completely filled out to allow us to process your application as quickly as possible:

☐ *Option 1)* If you are still living in Deggendorf (please take to the responsible agencies for signature):

| Agency granting the discharge: | Signature, date |
|--|-----------------|
| 1. Library: All books returned (Building G) | |
| 2. Sports officer: Sports equipment returned (ITC ² 2.56, Mr. Kaiser) | |
| 3. Key management: Keys returned (ITC ² 1.60, Mr. Dannerbauer) | |
| 4. Student services: Disbursement chip card credit (Cafeteria/Mensa F101, Ms. Pfeffer) | |

☐ *Option 2)*

I declare on my honour that I am no longer in possession of any objects belonging to the university.

Place, date _____

Signature _____

This application must be submitted to your processor responsible at the study centre with your original signature. You will receive the deregistration documents directly after submitting this application sent by post to your address stored in the HIS portal. Please update immediately if necessary.

Further important information about deregistration can be found at: <https://www.th-deg.de/studium/studienzentrum/studierende/274-studienzentrum/studierende32/1197-exmatrikulation>