Poznan, date ...........................................

………………………………………………………………

Number od a Student card

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First name, last name

…............................................................................................

mailing address

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PESEL

**Dean**

**Faculty of Chemical Technology**

**RESIGNATION FROM STUDIES**

I declare that as of …………….. I resign from the studies at Poznan University of Technology at the Faculty of Chemical Technology,

Field of study ...........................................................................................................

full-time studies, ............................ degree.

The reason of resignation…………………………………………..……………………………………… ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

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Student’s signature