



Hochschule Landshut
Student Service Center

Am Lurzenhof 1
84036 Landshut

Application for withdrawal from university

Personal information	
First and last name	
Matriculation number	
degree course	
Semester	

I hereby submit a binding request for my withdrawal from Landshut University of Applied Sciences.

The withdrawal is to take effect on _____.

Reasons:

- ☐ Interruption/abandonment of studies
- ☐ Change of university
- ☐ Internal change of degree program
- ☐ Other: _____

Date of application

Signature applicant

Note: A retroactive deregistration is not possible.