To: Dr Smuidra Žermanos

Dean of the International Student Department

of Rīga Stradiņš University

**STATUS CHANGE**

**Application form**

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| **STUDENT INFORMATION** |
| **Name, Surname:** |  |
| **Student card No.:** |  | **Study programme:** |  |
| **Study year:** |  | **Semester:** |  | **Group:**  |  |
| **E-mail:** | ***@rsu.edu.lv*** | **Phone No.:** |  |
| **Address:** |  |

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| **STATUS CHANGE – EXMATRICULATION** *(fill out, if you want to terminate studies at RSU.)* |
| **[ ]  *Please exmatriculate me from Rīga Stradiņš University upon my own request as of:*** |  |
| *(DD/MM/YYYY)* |
| **ADDITIONAL INFORMATION** *(Only for internal office use)* |
| [ ]  *I plan to resume studies at RSU starting with\** | [ ] *September 20* | [ ]  *February 20* |
| \*The information you provide here is for planning purposes only. Should you wish to return to RSU on the dates you mention above, you must submit a separate Application regarding Status Change within 5 working days before the beginning of the semester. |

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| **STATUS CHANGE – ENROLMENT***(Fill out, if you want to resume studies at RSU. It is possible within 2 years, starting from the date, when Rector’s decree regarding the exmatriculation from the list of students is enacted.)* |
| **[ ]  *Please enrol me at Rīga Stradiņš University as of:*** | **[ ]  *September 20*** | **[ ]  *February 20*** |
| ***after I was exmatriculated from it:*** |
| **[ ]** *due to poor academic progress; allowing me to repeat the study courses I failed for an additional fee.* |
| **[ ]** *due to non-payment of fees; having covered all financial debts (payment order enclosed with this application).* |
| **[ ]** *upon my own request.* |
| **[ ]** *other reason (specify)*  |
| *Course(s) to be mastered repeatedly (to be approved by the Dean’s Office):* | 1.
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| **Signature** |  |  | **Date** |  |

Upon completion, please submit or send this form to the **Student Services** in RSU Main building

**Address:** Student Services, 16 Dzirciema Street, Block K, Room 100, Riga, LV-1007, Latvia

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| ***Received at RSU Student Services*** |  | ***For office use only:*** |
|  | **Date** |  |
| **Signature** |  |
| **Decision** |  |