Otto-Friedrich-Universität Bamberg



Otto-Friedrich-Universität Bamberg Studierendenkanzlei Kapuzinerstr. 25 (Rückgebäude) 96047 Bamberg Eingang:

Request for leave

for the summer semester 2025

Surname: First name:	Student registration number:

Reason for leave	
Study abroad Please submit a confirmation issued by the International Office or the original registration certificate issued by the university abroad and a German translation, if applicable.	
Internship in Germany Internship abroad	
Please submit the internship confirmation (details of start, end, activity and place of work) or a copy of the internship contract (all pages and signed by all parties).	
Illnes Please submit an original medical certificate confirming that the person to be granted leave is not fit to study.	
Maternity and/or parental leave <u>During maternity leave</u> : Please submit a medical certificate confirming the expected date of delivery. Alternatively, the original maternity passport must be submitted. <u>After the birth of the child</u> : Please submit he child's birth certificate (copy).	
Care of a close relative Please submit an original medical certificate, certifying that the care cannot be provided by a person other than the person to be granted leave, as well as proof of the care level of the relative to be cared for.	
Business start Please submit a certificate (copy) from the Department of Research Funding and Transfer (Z/FFT) .	
Service obligation for voluntary military service/federal voluntary service <i>Please submit a certificate of service (copy).</i>	
Foreign language or school assistance abroad Please submit the notice (copy) of participation in the KMK Foreign Language Assistance Program.	



Signature