

**國立嘉義大學休學申請表**  
**National Chiayi University**  
**Application for Suspension of Studies**

Name		Gender		Date of Birth (dd/mm/yyyy)		Student ID No.		
Department/ Graduate Institute				Forwarding Address				
Reason for Suspension				Period of Suspension		From _____ (semester) _____ (academic year) To _____ (semester) _____ (academic year)		
Stamps	Student's signature		Advisor		Department		College	
	Library		Student Affairs Office Division of Life Guidance &		Office of International Affairs		Division of Registration	
	Dean of Office of Academic Affairs					Office of General Affairs (Cashier Division) <small>後會單位若業務需要請自行影印</small>		
Notes :								
1. Please obtain stamps from the above departments and send this application form together with the student ID to the Division of Registration . 2. Applicants requiring certificate of study should fill out another appropriate application form.								