Suspension & Resumption Application Form of ZUFE

（Overseas Students）

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| --- | --- | --- | --- | --- | --- |
| Name |  | Major |  | | |
| Gender |  | Nationality |  | ID NO. |  |
| The Type of changing status（suspension, resumption） | |  | | | |
| Reason（Summary）：  Applicant: Date: | | | | | |
| Resumption after sick leave must be signed by the university hospital. (因病休学，复学需校医院签字)  The university hospital’s opinion：  Signature: Date: | | | | | |
| International Students’ Affairs Office’s Opinion：  Signature: Date: | | | | | |
| Teaching Affairs Office’s Opinion：  Signature: Date: | | | | | |
| Instruction from Vice-dean：  Signature: Date: | | | | | |
| Note： | | | | | |

Notice：This form is in 3 copies, one for International Students’ Affairs Office, one for Teaching Affairs Office, and one for student.