**Checklist – Termination / Vacation from Studies**

Please obtain the signatures of all the functions detailed below on this form. Return the form to the Graduate Studies Secretariat at the Faculty.

**Student’s name:**  **Date of termination of studies:**  **Room:**

**Computers**

I hereby confirm that the above has returned the laptop computer in his possession

Date Shirly Kruvi (Room 318)

I hereby confirm that the student is not in possession of any Faculty equipment (laptop lock, software)

Date Shirly Kruvi (Room 318)

**Building equipment**

I hereby confirm that the above has returned all office keys, the magnetic card, and any other equipment belonging to the Faculty, and I further confirm that I have verified that the student has removed all their personal belongings from the room and left an orderly work station.

Date Yaniv Abutbul (Room 203)

**Teaching secretary**

I hereby confirm that the above terminated his teaching duties for current semester.

Date Oshrit Sender/Keren-or Cohen (Room 203/4)

**Graduate Studies Secretariat**

I hereby confirm that the student’s scholarships have been terminated and notification has been forwarded to the Graduate School

Date Anna Kleiner (Room 503)