

Postponement appeal MilVrb HSG

Personal data

AHV-Number: _____	Matriculation Nr.: _____
Name: _____	First name: _____
Rank & Function _____	Division: _____
Date of birth: _____	Phone : _____
Cantonal military office _____	HSG-Email: _____

Studiensituation

<input type="checkbox"/> Program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other	Name: _____		

Start date studying: _____	Level: _____
Semester: _____	Sem. Number: _____
Attempt: _____	<input type="checkbox"/> first <input type="checkbox"/> second
Expected until: _____	Next: _____

Service to postpone

	Military	Civil-prot.	Civil-duty
Service:	<input type="checkbox"/> Rekrutierung <input type="checkbox"/> RS - Rekrutenschule	<input type="checkbox"/> VBA 1	<input type="checkbox"/> WK / ADF
Cadre formation:	<input type="checkbox"/> Anw S / UOS <input type="checkbox"/> Fw/Four LG	<input type="checkbox"/> OS	<input type="checkbox"/> Praktikum/Abverd.
Other services:	Name: _____		

Kp/Unit _____	Command: _____
from/until: _____	Just for Staffofficers and Kp Kdt

Reason*

	Zusatzinfo	notwendige Beilagen
<input type="checkbox"/> Assessmentjahr		keine
<input type="checkbox"/> Central exams	Period: _____	keine
<input type="checkbox"/> Illness > 4W/Sem		Medical certificate
<input type="checkbox"/> Second draft same year	Typ/Dates: _____	Old draft letter
<input type="checkbox"/> Exchangeprogram	Dates/Place: _____	Confirmation of Uni
<input type="checkbox"/> Internship ≤ 4 Mts	Dates: _____	Employment contract

<input type="checkbox"/> Unacceptability	Attachment of proof needed
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Alternative dates

Dates: _____

At least one replacement date

Preference	
<input type="checkbox"/> Replacement	In the same year (<i>Gast-WK</i>)
<input type="checkbox"/> End of service	Postponement to next year

Comment

Place and date

Signature