................................................................................................ Krakow, .........................................

 (*Name and Surname*) (*Date*)

Field of Study: .........................................................................

Specialisation track: ................................................................

Year of study: ................. Semester: .......................................

Student identification number or code: ...................................

first-cycle/ second-cycle/ long-cycle master’s degree\*) studies

full-time/ part-time\*) studies

**dr Maciej Kluz**

**Rector of the Andrzej Frycz Modrzewski Krakow University**

I kindly ask for .....................................................................................................................................

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 .........................................................

 (*student’s signature*)

Attachments to the application:

1. .......................................................
2. .......................................................

Student Service Office comments:………………………………………………………………………………….. .....................................................................................................................................................................................

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**Rector’s decision**: .....................................................................................................................................................................................

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Justification of the rejection: ......................................................................................................................................

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Krakow, (*date*) ......................... Rector’s signature and seal: ...................................................................

I acknowledge the receipt of the decision: .................................................................................................................

 (*date and student’s signature*)