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

**Prof.** ……………………………………………..

**Dean of the Faculty of** ………………………….

**of Andrzej Frycz Modrzewski Krakow University**

I kindly ask for:

1. a copy of diploma in English language;
2. a copy of supplement in English language.

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(*student’s signature*)

Attachments to the application:

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

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

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**Dean’s decision**: Pursuant to par. 77 point 2 of the Act dated 20th July 2018 – Law on Higher Education, I *agree / do not agree*\* to the issuance of a copy of diploma in English language, a copy of suplement in English language.

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

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

Instruction:

This decision may be appealed to the Rector of the Andrzej Frycz Modrzewski Krakow University through the Dean of the appropriate Faculty within 14 days of the decision reception.

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

(*date and student’s signature*)

\* cross out irrelevant