

Student

.....
(name(s) and surname)
.....
(student's number)
.....
(field of study, specialization)
.....
(form of studies –full-time./part-time., form of education-long-cycle/ first-cycle/second-cycle.)
.....
(year of study, semester)
.....
(telephone number)

Warsaw

Application submitted on..... Registration No.:.....

Dean

.....
.....
(name of the Faculty)
Medical University of Warsaw

APPLICATION

I apply for permission to conditionally take up studies in next academic year /semestr *,
In the academic year despite lack of credit in:

.....
Justification:
.....
.....

.....
Signature of the student

Pursuant to § Study Regulations of the Medical University of Warsaw, introduced by the Resolution of the Senate of the Medical University of Warsaw No. of

I hereby agree to take up studies in the next semester/year*, provided that you receive credit for the course covered by the application by, along with the payment of fees resulting from the University's internal regulations, the amount of which will be indicated by the Dean's Office.

Pursuant to Article. 107 § 4 of the Code of Administrative Procedure, the justification of the decision was omitted, because it fully takes into account the request of the party.

.....
Date and signature of the Dean

I don't agree to take up studies in the next semester/year*,

Justification:
.....

.....
Date and signature of the Dean

The decision may be appealed against to the Rector of the Medical University of Warsaw within 14 days from the date of delivery of the decision.

I received on:
Date and signature of the student

* delete as appropriate