Date received: Registry number:

Received by: Item number:

**Final Exam – Late registration/deregistration**

Student’s name:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |

Neptun code:

Address

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |

Postcode:

Phone:

E-mail:

**Subject of the request:**

☐ registration for the final exam

☐ deregistration from the final exam

**Reason (optional):**

**Study program:**

**Specialization:**

**Level:** ☐ BSc ☐ MSc ☐ postgraduate

**Mode:** ☐ full-time ☐ part-time

Date: ­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: ­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**International Office**

**In case of registration for the final exam**

The student meets the conditions for taking the final exam:

☐ yes

☐ no

Date:

International Relations Officer’s signature

**Department’s opinion**

**In case of registration for the final exam**

As the head of the Department of (name of the department), I **accept / reject** (please underline) the request.

**Reason (optional):**

Date:

Head of Department’s signature

**Departmental administrator**

☐ The registration is completed. ☐ The deregistration is completed.

Date:

Departmental administrator’s signature