

Name, surname:..... Study year.....

Study program: .....

Address:..... Mobile:.....

## Application *Exams and Credits Recognition*

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**Justification of the application:** Study obligation was already fulfilled at:

**University:** .....

**Faculty:** .....

**Bachelor\***

**Master\* study program:** .....

**Field of study:** .....

<b>Name of fulfilled study duty:</b>	<b>Name of study duty at Third Faculty of Medicine, CU:</b>
<b>Fulfilled on:</b>	<b>Result of the exam:</b>
*Credit WS *Credit SS *Exam	

**Date:**.....

**Students signature:**.....

**Statement of the study field guarantor:**

**Recognized on:** .....

**Workplace:** .....

**Result recognized (credit, exam,...):** .....

**Name and surname of the guarantor:** ..... **Signature:**.....

**Decision of Dean (Vice-Dean) of the Faculty::**

\* delete as appropriate