Szczecin, date ……………

Ms/Mr…………………………….………..

Faculty……………….……………………...
Major:……………………………….……

Specialization:………………………………….
Year of study:…………………………………
Form of study:………………………………

Level of education:………………………….

Student ID number:…………………………………..

 **Vice-dean for student affairs**

 .……………………….……………………………..

**APPLICATION**

 **for entering diploma exam and specifying its date**

I have been awarded credits for all the classes scheduled in the plan and in the study curriculum at the full-time I/II cycle programme in the field of study…………………………………..………………………….…………………….

The **reviewer** proposed by the supervisor:……………………………… ……………………………………………...

The **chairperson of the diploma committee** proposed by the supervisor:……….……………………………….........

The proposed **date** **of the exam** (agreed together with the diploma exam committee):………………….……...….…..

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

 Student’s signature

Decision of the Dean: I allow/ I do not allow\* to enter the diploma exam

I set the date of the exam on: ………………………. hour. …………………

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

 Dean’s signature

…………………………………….

*Date of submission in the Dean’s Office*

*\* delate as appropriate*