**Application for**…………………………………………………………

|  |  |
| --- | --- |
| **Applicant:** |  |
| **Student identification number (UČO):** |  |
| **Contact address: (street, town, postal code)** |  |
| **Field of study:** |  |
| **Form of study:**  | Full-time studies  | Combined studies |

**Reasons for the application:\***

 ................................. ................................................ date signature

|  |  |
| --- | --- |
| **Supervisor:** |  |
| **Supervisor´s comment:** |  |
|  | date signature |
| **Guarantor of a course:** |  |
| **Comment of the guarantor:** |  |
|  |  |
| **The chairman of the doctoral board/doctoral committee:** |  |
| **Comment of the chairman of the doctoral board/doctoral committee:** |  |
|  | date signature |

\* the reasons have to be clear and specific

Note: Applications, completed as requested, including the comment of the supervisor, will be submitted by the student to the Office for science, research, quality and qualifications.