

University of Debrecen
Date:
Ref.number:
IT number:
Attachments:
Registrar:

Decision of the president of the Educational Committee:

Please fill this form with capital letters!

Request to the Educational Committee

Name of student:.....

Course:.....**year:**.....

Address:.....

Telephone number:.....

E-mail address:.....

Subject:.....

Your request:

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Reason: (Please attach the relevant documents or the copy of your lecture book!)

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Debrecen,

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signature