**APPLICATION FORM FOR STATE EXAM**

I, the undersigned ……………………….……………………………… (NEPTUN code:………………..) student of the University of Debrecen, Faculty of Public Health …………………………...…………….. program, declare that I intend to take state exam in the academic year ………………….………………… in **January / June**\* state examination period.

 **written practical oral**\*

\*The appropriate shall be underlined

**PERSONAL INFORMATION FOR COMPLETING THE DEGREE CERTIFICATE**

NAME: ............................................................................................................................................

Birth name: ......................................................................................................................................

Birth place (country, city):.................................................................................................................

Birth date: ...............................................................................................................................

Start of studies: ………………………………academic year

I declare that the above information is accurate.

Date: Debrecen, 202………..………………

………………………………………

 signature

Please return the signed application form filled out with a computer to your educational administrator, by **April 1, 2022**.