Kraków, ***Select a date***

***Click to add name and surname***

*Name, surname*

***Click to add student number***

*Student number*

***Choose a field of study*** *-* ***Choose a degree of study and semester***

*Degree, year i semester of studies*

***Click to add e-mail***

*e-mail*

***Click to add phone number***

*phone number*

full-time studies

***Choose the vice-dean of your field of study***

Vice Dean for Education

Faculty of Electrical Engineering, Automatics,

Computer Science and Biomedical Engineering

**Podanie o wpis na semestr z deficytem punktów**

**Request for registration for the next semester with ECTS credit deficit**

I hereby request for registering me for semester ***Choose a degree of study and semester***in academic year *………………* with the total admissible ECTS credit deficit of ........ ECTS:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| N.o | Academic coursesFull names of ALL overdue courses must be entered | Overdue semester number | Total number of ECTS credits | Total number of courses hours | Hourly rate for teaching activities\* | Fee for a overdue subjects | Faculty/Department for which the payment is being done |
| 1. |  |   |   |   |  |   |   |
| 2. |  |   |   |   |   |   |   |
| 3. |   |   |   |   |   |   |   |
| 4. |  |  |  |  |  |  |  |

**................................................**

(student signature)

**Vice Dean’s decision:**

I do not/give\* my consent for registeration with permissible ECTS credit deficit of study in the ........... semester in .......... academic year

Fee for retaking a course ................... no later than 15.10.23..../15.03.23.... \*

Space to justify the refusal decision:

…………………………………………………………………………………………………………………………………………………

…………………………………………………………………………………………………………………………………………………

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

Vice Dean’s for Education signature