Krakow, ***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 and 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

**Request for resumption of studies**

I kindly ask for the possibility of resuming studies for the *winter/summer*\* semester of *first-cycle studies/second-cycle studies*\* of ***Choose a field of study***in the academic year of ***Enter the academic year***.

Arrears:

*Courses I failed:*\*

*No backlogs*\*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Repeated courses** | | | | | | | |
| No. | Course Name  Please enter the full name of ALL outstanding courses | The semester number from which the arrears are | Number of ECTS points | Total number of course hours  W/C/L/P/S | Rate for 1 hour of teaching\*\* | Overdue course fee | Faculty/Department,  to which the payment is made |
| 1 | **Please enter each course on a separate line** |  |  |  |  |  |  |
| 2 | **If there are no repeated courses in the semester - please delete this table** |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |

Program differences:

*Courses - program differences to be completed are:\**

*No program differences\**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Courses - curriculum differences** | | | | |
| Course name | Semester number | Number of ECTS points | Total number of course hours  W/C/L/P/S | Faculty where the course is held |
| **Please enter each course on a separate line** |  |  |  |  |
| **If there are no courses with program differences in the semester - please delete this table** |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

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

(student signature)

**Decision of the Vice-Dean:**

I consent / do not consent\* to the resumption of studies in the semester ....... in the academic year ............................

No fees /Fee for repeating courses ................... until 15.10.20..../15.03.20.... \*

Space for justification of negative decision:

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

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

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

(Vice-Dean signature)