**REQUEST FOR A CERTIFICATE OF PREVIOUS STUDENT STATUS**

|  |  |
| --- | --- |
| Name: |  |
| Name at birth: |  |
| Mothers’ maiden name: |  |
| Citizenship: |  |
| Place and date of birth: |  |
| Permanent address: |  |
| Address for service: |  |
| Phone number: |  |
| E-mail address: |  |

**Data on previous studies:**

|  |  |
| --- | --- |
| Institution: |  |
| Faculty: |  |
| Degree course: |  |
| Major/Specialization: |  |
| Start of studies: |  |
| End of studies: |  |
| Year of issue of the certificate/certificate supplement: |  |
| Training level:  | □ Higher Education Vocational Training □ Bachelor’s degree □ Master’s degree □ Specialized further training |
| Type of training: | □ correspondence □ full-time □ evening  |
| Form of financing: | □ State scholarship □ Fee-paying□ State part-scholarship □ Self-funded□ State funded |

**Purpose of issuing a certificate (in Hungarian):**

□ Proof of previous student status

□ Proof of the form of financing for previous semesters

□ Pre-degree certificate Year of issue: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ Certificate of final examination Year of final exam: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ Other (please fill in the detailed justification in the comment section)

□ Certificate of subjects completed\*

|  |  |  |
| --- | --- | --- |
| Subject code | Subject name | Semester |
|  |  |  |
|  |  |  |
| \*the table can be extended as required |

Comment:

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I declare that the information I have provided is true and correct.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_