

Application was submitted in the dean's office:

(Date, signature and stamp of employee from the dean's office receiving the application)

Załącznik Nr 36
do Zarządzenia Nr 93/2023
z dnia 03.07.2023 r.
stanowiący Załącznik Nr 49
do Zarządzenia Nr 159/2012
z dnia 19.09.2012 r.

..... on.....

Surname and first name:
Student register no.:
Major:
Specialization:
Degree:
Form of studies:
Date of commencement of studies:
Year of studies:
Telephone/email :
Address of correspondence:

**Dean of
Faculty.....
of the Medical University of Silesia
in Katowice**

APPLICATION

I hereby apply for obtaining consent to **resume studies** in.....academic year in the major.....of full-time/extramural* uniform masters/first-cycle/second-cycle* studies.

Justification:

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

Appendices:

- 1.
- 2.
- 3.

Student signature

The above-specified student was removed from the list of students on.....on account of
.....
.....

Dean's office employee signature

I hereby **grant consent/do not grant consent*** for resuming studies subject to passing control exams from the subjects.

Signature of authorized person

* delete as appropriate