Name and surname: .............................................................................................. Date of birth ..........................

Study programme .................................................................................................................................. Year of study ...........

**REQUEST FOR RECORDING the result of a course completed at another university**

Title of the course in czech language:………………………………………………………………

Title of the course in english language: ……………………………………………………………

Number of semesters *(1 or 2):*……………. Semester *(winter, summer, w + s):* ……………...

Number of credits:  ………… Language of teaching:……… Scope of teaching: …………

Type of examination *(exam, credit):*………………Date of fulfilment of obligations: …………………….

Result*:*………………………………………………………

Name and surname of teacher (with titles): …………………………………………………………………...

University and faculty where the teaching took place: ……………………………………………………

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

**I declare that the course was completed at another university where I am not (was not) enrolled as a full-time student and the course was not completed as part of another study.**

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

 Date Signature of student

**Signature of the teacher and stamp of the department (institute) that guarantees the teaching of the course at another university:**

………………………………………………………………..

**Decision of the Vice-Dean for Student Affairs** (provided by the Student Affairs Department):