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Lodz, …………….…………

/date/

Name: ………………………………………………..

Student number: …………………………………….

Computer Science / Mathematics / Data Analysis \*)

Full-time / Part-time \*)

First degree / Second degree \*)

Year of study: …………………………....................

Phone number: ...……………………………………

**Associate Dean**

**for Academic and Student Affairs**

**Faculty of Mathematics and Computer Science University of Lodz dr Monika Bartkiewicz**

I kindly request permission to take in advance the courses

□ from a higher semester;

□ during a dean’s leave caused by the need to repeat a year of my studies.

I wish to attend the courses included in the programme of the …..…… \*\*) semester during the winter/summer \*) semester of the ……………/………….. academic year.

I wish to take in advance the following courses:

1. ……………………………………………………………………………………………..........
2. ……………………………………………………………………………………………..........
3. ……………………………………………………………………………………………..........
4. ……………………………………………………………………………………………..........
5. ……………………………………………………………………………………………..........

Justification:

……………………………………………………………………………………………................

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

I know that I have to pay tuition fees for the …..…… \*\*) semester.

……………..………………………………………

*Student’s signature*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*) cross out inappropriate

\*\*) write the number of the semester from the programme