………………………………………………. Poznań, on ………………….

 (Student’s name and surname)

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

 (field of study)

………………………………………………..

 (course delivery mode: internal, external)

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

 (degree and year of study)

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

 (contact: phone number)

 Mr

 Prof. UPP dr hab. Edward Roszyk

 vice-dean for teaching

 of the Faculty of Forestry and Wood Technology

 of the Poznań University of Life Sciences

**Request for registering as a student of a higher semester with a permissible ECTS deficit**

I hereby request for registering me as a student of semester

with the permissible credit deficit which is: ECTS.

I hereby request for allowing me to retake the following courses:

|  |  |  |  |
| --- | --- | --- | --- |
| No. | Course name | ECTS | Couse form (lecture, classes, seminar) |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |
| Total number of ECTS deficit from the beginning of the study: |  |  |

 ……………………………………………

 (Student’s signature)

Vice-Dean’s opinion:

**Hereby I consent conditional registering as a student of a higher semester with an ECTS deficit.**

Above courses should be retaken in semester

Deadline of completion:

The condition of acceptance is payment for retaken courses in amount of

**I do not consent –** I am referring to repeating the semester / to be removed from the list of students.

Poznań, on ……………………………… .……………………………………..

 (Vice-Dean’s signature)

I took note of the decision.

Poznań, on ………………………………. ……………………………………..

 (Student’s signature)