Wrocław, date …………………………

Student`s name and surname ………………………………..…….………………

Field of studies/programme/major …………………………………………..……

Year of studies ………………………

Semester …………………………….

Student Card Number ……………….

E-mail address ……………………….

Phone number ………………………..

**Vice-Dean for Student and General Affairs/**

**Prodziekan ds. studenckich i ogólnych**

**dr hab. Jacek Przygodzki prof. UWr**

I kindly ask you to agree to the recognition of the courses and ECTS points obtained in the field of study/programme/major: ………….................................................................................................................... .................................................. ..................................................... ..................................................................... in the academic year ...... ......................................................................................................................................

I justify my request by the convergence of the learning outcomes of these courses on both programmes/majors:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name of the university** (programme/major) where the student passed the requested subject | **Form** of studies \* | **Course** (academic year in which the requested course was passed) | **ECTS**points | **Grade**from | **Hours** |
| Pass/fail or grading | Exam | Class | Lecture |
|  |  | 1. |  |  |  |  |  |
|  |  | 2. |  |  |  |  |  |
|  |  | 3. |  |  |  |  |  |
|  |  | 4. |  |  |  |  |  |
|  |  | 5. |  |  |  |  |  |
|  |  | 6. |  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Field of study**programme/major at the University of Wroclaw | **Course** (year of study/semester in which the requested course supposed to be recognized) | **ECTS**points | **Grade**from | **Hours** |
| Pass/fail or grading | Exam | Class | Lecture |
|  | Ad.1. |  |  |  |  |  |
| Ad.2. |  |  |  |  |  |
| Ad.3. |  |  |  |  |  |
| Ad.4. |  |  |  |  |  |
| Ad.5. |  |  |  |  |  |
| Ad.6. |  |  |  |  |  |

\* Form of studies: F – Full-time, O – other (please specify)…………………………………………………

Attached:
- certificate from the dean's office confirming passing the course along with the obtained grade and number of ECTS points
- curriculum of the subject (program content) confirmed by the dean's office

………………………………………………..

(legible signature of the student)

**Vice-Dean's decision:**

**I do agree: ……………………………………………………………………………………………………..**

**I do not agree: …………………………………………………………………………………………………**

…………….………………………………….

(legible signature of the vice-dean)