

APPLICATION for eligibility for the PoMost Programme

Student data:

Family name	First name
PESEL number	year and semester of study, major
level of study (first degree, second degree, masters)	form of studies (full-time, part-time)
contact phone number	e-mail address

Rector.....
name of the home university

through

Dean (Head of Studies)
name of faculty / field of study

Please qualify me to deliver the course in the summer/winter term of the academic year of
in.....in the field of
name of the host university

Please find attached the syllabus of the proposed course.

.....
place, date the student's handwritten, legible signature

Opinion of the Dean (Head of Studies):

.....
.....

Credit for the course will be given based on:

- recognition of learning outcomes for a course
- additional achievement included in the diploma supplement

.....
date Signature of the Dean (Head of Studies)

Rector's decision: I approve / I do not approve

.....
date Signature of the Rector

Opinion of the Dean of the Faculty (Head of Studies) where the above-mentioned subject is to be pursued:

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

.....
date

.....
Signature of the Dean (Head of Studies)

Decision of the Rector of the host university: I approve / do not approve of the student's admission

.....
date

.....
Signature of the Rector