

Name:

Student ID:

Academic year:

Period of Study: *WS / SS (delete as appropriate)*

Application for Erasmus Students Special Course Requirements*

In cases where the above-mentioned Erasmus student needs to be evaluated in a way different from the one prescribed by the Curriculum.

Course:

I would like to be evaluated by **Course credit / Final exam** *(delete as appropriate)*

In Hradec Králové,

Applicant's Signature:

Statement of the Guarantor of the Course:

I agree/ I disagree *(delete as appropriate)* to the above-mentioned and will record the relevant evaluation to the student's Study Record Book accordingly.

Guarantor's Name:

Guarantor's Signature:

In Hradec Králové,

* The application form must be signed by the relevant guarantor DURING the FIRST WEEK of the SEMESTER and handed in to Ms Veronika Drbohlavová (door A-219 at the Study Department)