



- (1) Name and surname: ..... (6) Wrocław, day: .....
- (2) Student record book number: .....
- (3) Study degree: ..... **Vice Dean for**
- (4) Year ..... and study semester ..... **Research and Intern. Coop.**
- (5) Study specialization: EQM **PhD Karol Leluk**

### Request for ex-officio enrollment

Hereby I request for ex-officio enrollment after finishing the registration to groups specified below.

No.	Course full name	Course form: laboratory (L), project (P), seminary (S), lecture (Le**), exercises (E)	Group code	Course tutor signature
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

.....  
Student's signature

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Dean's decision:  
I agree/I do not agree\*

.....  
Date, signature, stamp

\* delete where inapplicable  
\*\* in the case of lectures (Le) tutor's permission is not demanded