

Name and surname: Academic year 202...../202..... semester:.....

Day, month and year of birth: Year of study: Level of study: study program:.....

Applicant's address: POSTCODE:.....

Email:..... Phone no.:

Explanatory notes

1For each teaching unit (lecture, seminar, etc.), state separately

2Determined by the teacher(s) depending on the reasons of the ISS and the subject

3Requirements for completing the course within the ISS

Appendix No. 1 to the Application for Individual Study Schedule - Plan for Individual Fulfilment of Study Obligations at ISS

To be filled in by the student			To be filled in by the teacher				
Course code	Course Name ¹	Form (P, S...)	Number of possible absences ²	Assessment method ³	Deadline for completion of the assessment	Teacher's name	Teacher's signature

Date:.....

.....

Signature of the applicant