

**Application for recognition of exams on the basis of Article 15,
paragraph 4 of the Study and Examination Regulation in bachelor
and master study programs of VŠB – TU Ostrava.**

Surname and name:

Login: Class:

I am requesting the recognition of the exams in the attachment.

Date

.....

Student's signature

Dean's decision

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

.....

Date

.....

Dean's signature

	Name of completed subject at another university.	exam/marked credit/credit mark (words), date (dd.mm.yy), points	Recommendation of the subject guarantor and department stamp	Subject of the current study plan
1.				
2.				
3.				
4.				
5.				
6.				

Attachment: the list of subjects completed at another university confirmed by the study department from another university.