##### APPLICATION FOR RECOGNITION OF PREVIOUS EDUCATION/ STUDY OBLIGATION

## Fill in the application for recognition of previous education/ study obligation electronically and forward it in docx. form (word) to the email address referat@almamater.si and by regular post with mandatory attachments to the address: Alma Mater, Slovenska ulica 17, 2000 Maribor, Slovenia. Attachments must be sent by regular post; electronic version is not needed.

## Surname and name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address: *\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

**E-mail: *\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

**In the study year 20\_\_ / 20\_\_ I am/ will be enrolled to the \_\_ year of the study program *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* at the institution (Select).**

**Study level: (**Select)

**Study location: (**Select)

I hereby request for the recognition of exam(s), which I have completed at the faculty \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, program \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

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| --- | --- | --- | --- | --- |
| Completed subject (subject name) | Grade/ ValueECTS | Subject atAMEU (subject name)  | Value/ Grade at AMEU | Recognised grade ECTS (filled) |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ |
|  | \_\_\_\_\_\_\_ |  |  | \_\_\_\_\_\_\_ |
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|  | \_\_\_\_\_\_\_ |  |  | \_\_\_\_\_\_\_ |

Please attach:

* Original copy of last education certificate (completed high school or university degree) with transcript of records
* Table of contents of the programme/subjects (syllabus)
* A confirmation of payment:
	+ EUR 100 – application for recognition of previous education
	+ EUR 200 – recognition of study obligations completed elsewhere

Please transfer the fees to the following accounts: TRR ECM: SI56 0312 1100 0565 129, TRR AP: SI56 0312 1100 0729 544, TRR ISH: SI56 0312 1100 0729 447

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_ Student signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_