

Registrar's Office of Faculty of Pharmacy

Request for late activation

A.	A. Personal data of the student				
Surname:		First name(s):			
Neptun code (username):					
Major: Pharmacy		Admitte	ed in (year):		
n					
B.	Type of request				
	Active semester after the registration period				
C. Reasoning (with attached documents if possible)					
Attached documents: yes / no					
Date:			Signature:		
D. For Office use only!		Registry number: PTE//20			
Received on:			Administrative officer:		
Request received before the deadline established by the Code of Studies and Examinations: \Box yes / \Box no					
Notes:					
Request accepted / Kérelem elfogadva		Request rejected / Kérelem elutasítva			
Decision made by: Educational Committee / Registrar					
	Signature	Se	eal	Date of decision	
Student informed:		Registered in Neptun:			

To be handed in at the Registrar's Office!