

.....
Name and surname
(Imię i nazwisko)

.....
Student identification no.
(Numer albumu)

.....
Mobile phone, e-mail
(Telefon kontaktowy, adres e-mail)

**STUDENT APPLICATION
FOR A WAIVER OF EDUCATION FEES
(tuition fee for repeating classes)**

Data
(Data)

Faculty, Field of study.....
(Wydział, Kierunek studiów)

Year of study.....
(Rok studiów)

I kindly ask for total / partial * exemption from tuition fee for repeating classes
in the summer / winter semester * of the academic year 20.... / 20....

Reasons for the request

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Yours sincerely

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