



 Place and date

 First name and Surname

 Student's number

 Field of Studies

 Level (1st or 2nd)

year semester.....

 Address for correspondence

 e-mail

 phone number

 Vice Dean of the Faculty of Economics

Change/supplement of an elective course

I hereby request consent to change the elective course in the winter/summer semester in the academic year/..... According to the information in eHMS, the following elective courses* have been approved:

	No.	Time slot (e.g. Friday 10-12)	Course (1)	Course (2) – if two are selected to be carried out at the same time
speciali zation	1			
	2			
general	1			

* please enter all courses that are not rejected in the system, if there is no selection please enter - "no selection"

I would like to take the following courses – in order of preference (please enter courses only in the missing – free – time slots):

	No.	Time slot (e.g. Friday 10-12)	First course	Time slot	Second course	Decision
specializ ation	1					
	2					
general	1					

Reason:

.....

I undertake to read the decision.

 Student's signature

NOTE: Third semester Master's students complete the table on the back!

Decision of the Vice Dean:

I do not consent to changing the course./ I consent - the courses to be implemented are specified in the table or below.

 Date

 Signature


Version for students of the third semester of Master's studies
Application to change/supplement an elective subject

I hereby request consent to change the elective course in the winter/summer semester in the academic year/..... According to the information in eHMS, the following elective courses* have been approved:

	No.	Time slot (e.g. Friday 10-12)	Course (1)	Course (2) – if two are selected to be carried out at the same time
specialization	1			
	2			
	3			
	4			
general	1			
	2			

* please enter all courses that are not rejected in the system, if there is no selection please enter - "no selection"

I would like to take the following courses – in order of preference (please enter courses only in the missing – free – time slots):

	No.	Time slot (e.g. Friday 10-12)	First course	Time slot	Second course	Decision
specialization	1					
	2					
	3					
	4					
general	1					
	2					

Reason:

.....

I undertake to read the decision.

Student's signature

Decision of the Vice Dean:

I do not consent to changing the course./ I consent - the courses to be implemented are specified in the table or below.

Date

Signature