**LATVIA UNIVERSITY OF LIFE SCIENCES AND TECHNOLOGIES**

|  |
| --- |
|  |
| *(faculty)* |
|  |
| *(study programme)* |
|  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *🗆 full-time* | *🗆 part-time* |  | *academic year, matriculation No.* |  |
|  |
|  |
| *(student's first name and last name)* |

***APPLICATION***

*Jelgava*

|  |  |
| --- | --- |
| ***To the Dean*** |  |

|  |  |  |
| --- | --- | --- |
|  | *, 20* |  |

*(date)*

|  |  |  |
| --- | --- | --- |
| *I request to* ***register*** *me for* | *🗆 full-time* | *🗆 part-time* |
|  |  |  |
|  | *🗆 undergraduate studies* | *🗆 master’s studies* |
|  |  |  |
|  |  |
| *(name of the study programme)* |  |
| *study programme* |  | *academic year with* |  | *academic debt (debts)* |

*for the following course (courses):*

|  |  |  |  |
| --- | --- | --- | --- |
| *Nr.* | *Code and title of study course* | *I undertake to pass until* | *Agreed with (teacher's full name and signature)* |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |
| --- |
|  |
| *(signature of student)* |

*APPROVED*

|  |  |
| --- | --- |
| *Dean* |  |
|  | *(Dean’s signature and its transcript)* |