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| **International Admissions Office**  **Application for PAYMENT EXTENSION** |
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| **PERSONAL INFORMATION** | | | |
| **Name, Surname:** |  | **Date of birth:** |  |
| **E-mail:** |  | **Study programme:** |  |

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| **APPLICATION for PAYMENT EXTENSION** | | |
| ***Please evaluate my application for payment extension for:*** | | |
| **Type of payment:** | Tuition fee for the **first semester** | |
| Registration administration fee | |
| ***I hereby guarantee to make the payment until:*** | | \_\_\_\_.\_\_\_\_.\_\_\_\_\_\_. (DD.MM.YYYY.) |
| ***The reason for payment extension:*** | | |
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| **CONFIRMATION** | | |
| I confirm that all information provided above is true and complete | | |

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| **Signature** |  |  | **Date** |  |