…..... .....
place of signature date

Application for a reduction in tuition fees

Faculty .....
field and year of study.....
form of study.....
level of studies .....
phone/ e-mail .....

I am applying for**:**

1) full exemption from payment for educational services *
2) partial exemption from payment for educational services
3) deferment of the payment deadline
4) payment in installments ……

Student details:

name and surname.....

ID number .....

home address: ….....

residence address** ……..……

justification of the request:

….....
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I declare that I do not have any overdue payments for educational services provided at the Jan Kochanowski University in Kielce

….....
Signature

Attachments:
1) …..... 2) ….....
3) ….....4) ….....

* choose appropriate
** the student's place of residence in Poland

Informacja z Dziekanatu Wydziału/Filii:

Data rozpoczęcia studiów…..... ostatni zaliczony semestr/rok …..

Średnia ze studiów …..

Potwierdzenie braku zaległości …..

Informacje dodatkowe:

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…….

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……..….....

data i podpis pracownika Dziekanatu

OPINIA DZIEKANA

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Uzasadnienie:

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…….

data i podpis dziekana