



Number of active semesters within the framework of state-financing (enter the exact number)

My legal student status was terminated in all other Institutes of Higher Education

I hold a Master's Degree.

I am a student of non-Hungarian nationality enrolled in the state-financing programme. **Category:** .....

I have a certified disability concerning physical abilities, health or vision \*\*\*

\*\*\* After every state-financing student the university may apply for an additional financial support from which the student directly receives an allowance.

**3. I would like to obtain the maternity/child benefit (for self-financing students only!):**

**4. Present workplace:**

Name:

Address:

Phone:

Position:

**5. Date of issues and serial number of Language Exam Certificate:**

Language:

Level:

**6. The point below only applies for students admitted to a state-financing programme!**

As the student of the University I hereby declare that, to date I have spent  active semesters in the state-financing programme. (Please, enter the correct number, in case no state-financing semesters have been spent, please, enter two zeros into the rubrics)

**7. Declaration**

As the student of the University I understand that according the Graduation Requirements of the major an intermediate-level language exam (type C) accepted by the Hungarian state is required in order to acquire a degree certificate.

**As the student of the University I hereby declare that the above information is true to the best of my knowledge. I shall report any change in the above to the Registrar's Office immediately, if not I shall be liable to prosecution.**

Pécs, 20. ....

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(Signature of the student)

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**To be completed by the EC!**

I have compared the information sheet with the ETR database and have registered changes.

Pécs, 2017 .....

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(RO representative)