

Request for the conclusion of a Contract for Study in the Lifelong Learning Programme

Last name, first name:			
Date and place of birth:			
Nationality:			
Passport number: or Personal identification number (“rodné číslo”)			
Permanent address:			
Contact address: (if different from the permanent one)			
E-mail:			
Telephone:			
Academic year: (in format 202x/202y)		Winter semester:	
		Summer semester:	

I am interested in studying in the Lifelong Learning Programme in Informatics and for the purpose of signing the study contract, I agree to the processing of the above personal data.

Courses (codes and title):

Offer of all courses

<https://bilakniha.cvut.cz/en/f8-predmety.html#gsc.tab=0>

Code	Course name	Credits	Range

Prague, date

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Applicant's signature