Admission to subsidiary course Bachelor or Master

Make sure you have registered for the correct study programme in Studielink before sending in the form[1].

To be filled in by the student

Student number UG

Academic year

First name(s)

Last name

Date of birth

Email address

applies for admission to subsidiary courses of the _____ programme

_____

and wants to be admitted as of 01 _____ _____
Day Month *Year*

If the date is later than 1 September, the Admissions Board allows the student to start per the requested date by signing this document.

The student would like to take the following courses

Course code	Course name

Signature student

_____

To be filled in by the Faculty

The Admission Board of the _____ programme

_____

that holds CROHO-code _____

declares that the above-mentioned student will be admitted to the above-mentioned subsidiary courses.

Location and date

Signature

_____ , _____

Name

_____ _____

[1]Send the form to the education desk of the corresponding Faculty.

Aug `24