

Sopot, .....

.....  
*student's name and surname*

.....  
*home address*

.....  
*telephone no., e-mail address*

.....  
*student's record book no.*

.....  
*form of studies / field of study / specialisation*

.....  
*year / semester of studies*

**Tomasz Gutowski, PhD**

Deputy Dean for Student Affairs and Education

Faculty of Economics, University of Gdańsk

I would like to apply to study in the next grading period in semester ..... (put the number of the semester) in the academic year ..... with ECTS points deficit of ..... from the course/courses\*:

No.	Name of the course	Exam/ Assessment	ECTS points
1			
2			
3			
4			
5			

In accordance with § 8 section 1 of the University of Gdańsk Senate Resolution 64/14 of September 25, 2014 regarding conditions of payment for University courses of study, educational services rendered by the University of Gdańsk, and the procedures and conditions for waiving such payments, **I agree to pay fee for points deficit within 14 days from the date of submission this application.**

.....  
*Student's signature*

.....  
\* *delete if inapplicable*