# Evidence number: **Application form** master<sup>1)</sup> – second degree The stamp of Matej Bel University or faculty of the university: Academic year: 20 / 20 Date of delivery: Citizenship: First and middle name: Academic title: Surname: Marital status: Maiden surname: Date of birth:/day Sex<sup>2)</sup>: male female month year Place of birth: **Country:** Personal ID Nr: Nationality: ID card number (by foreign participant passport number): Phone number: E-mail address: Home address: Street and Number: City: Post code: State: Region: Correspondence address (if it is different from home address): Street and Number: City: Post code: Region: State University name: Faculty name: Affiliate branch: Study programme<sup>3)</sup>: Form of study<sup>4</sup>): Method of study<sup>5</sup>): Study programme<sup>3)</sup>: Method of study<sup>5)</sup>: Form of study<sup>4</sup>): Study programme<sup>3)</sup>: Form of study<sup>4</sup>): Method of study<sup>5)</sup>: Foreign language on entrance (intake) test <sup>6</sup>: Completed bachelor study at University: University name: Faculty name: Affiliate branch: Study programme - specialization: Study programme: Academic title: Study began: Study finished:

FILL IN ALL SECTIONS OF THE APPLICATION LEGIBLY (HANDWRITTEN CAPITALS) Instructions are on the third page.

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Previous university study education, including not finished <sup>7)</sup>							
University name:							
Faculty name:							
Affiliate branch:							
Study programme - specialization:							
Study programme:							
Received degree of education:							
Study began:	Study finished:	Academic title:					

Fill in the results from the bachelor study for each term or semester and attach a photocopy of the bachelor diploma and/or transcript.

The results of the bachelor study in each semester/term (or attach the official University transcript)   Subject Semester/Term									
Subject	I.	II.	III.	IV.	V.	VI.	VII.	VIII.	
								-	
Grade point average									
State Point at or age									

I confirm that the data	a is correct. Not necessary if transcript has an o	official seal				
Date:	Signature :	School stamp:				
Medical certification of health for university study and job performance in the chosen study programme (according to the requirement of the university or faculty)						
Date:	Signature of medical doctor:	The stamp of medical doctor:				

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#### Instructions for completing the application:

- 1) Cross out if not applicable. This application is meant for bachelor graduates.
- 2) Tick gender.
- 3) Fill in the name of study programme. If you apply for more programmes, consult the university/faculty for instructions.
- 4) Form of study to be completed. Indicate full-time or external form of study.
- 5) Method of study. Indicate full-time study, distant learning or blended learning depending on the possibilities of the study programme.
- 6) If admission requires an exam in a foreign language, indicate your choice of language.
- 7) Additional information if needed. Please specify completed studies, current studies or unfinished study (e.g. completed courses).
- 8) An applicant with a disability may request an entrance exam and the method of necessary requirements regarding the disability.

## **Declaration and Agreement**

I declare that all supplied information is true and that I have not withheld any material facts. In compliance with § 7 of the Act. 363/2005 about protection of personal data; with my signature I give permission for the processing of my personal data for the purpose of admission until the date of entry into first year Master's study at university. This agreement applies to the personal data in the application and its annexes, which the university is entitled to request in accordance to section 58, para.5 of Act no. 131/2002 Coll. on Higher Education. I understand that I can revoke this consent only in writing with stated reasons to the university or faculty. I am also aware that the data may be processed only by authorized personnel who are required to comply with the provisions of Act no. 363/2005 on Privacy. The processed data will be archived and disposed of in accordance with the applicable legislation of the Slovak Republic

#### Applicant's declaration of agreement:

This agreement relates to specific data e.g. regarding additional requirements for admission to the study programme with regard to the diversity of the university in accordance to the legislation (e.g. health status) - see section 58, para.5 of the Act.

This permission does not apply to name, surname, ID number, place of birth, marital status, nationality and other, and therefore the applicant agrees to allow the processing of data without prior consent - see section 58, para.3 of the Act, where the data are listed. The consent is required with all other data.

### Additions to the application:

- 1. Curriculum vitae
- 2. Information about of payment of admission fee
- 3. certified photocopies of completed studies (university diploma, state exam certificate, additional certificates) according to the university requirements

Date: Signature of participant:

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