

University of Debrecen
Date:
Ref.number:
IT number:
Attachements:
Registrar:

Decision of the president of the Educational and Credit Transfer Committee:
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**Please fill this form with capital letters!**

## Request to the Educational and Credit Transfer Committee

**Name of student:**.....

**Course:**.....**year:**.....

**Address:**.....

**Telephone number:**.....

**E-mail address:**.....

**Subject:**.....

**Your request:**

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**Reason:** (Please attach the relevant documents or the copy of your lecture book!)

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Debrecen, .....

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signature