



OM azonosító FI 58544

UNIVERSITY OF PÉCS

Faculty of Health Sciences
Health Sciences Doctoral (PhD) School**Registration sheet (for the first registration 20 /20. semester**

Registration number:	Semester (1-6): 1	School year and semester: 2005/06/2
Governmental scholarship: <input type="checkbox"/>	Privately funded scholarship: <input type="checkbox"/>	

Name:	Maiden name:
Citizenship:	
Date of birth:	Place of birth:
School ID:	Program ID:
Supervisor:	

Permanent address:			
E-mail address (1):		Email address (2):	
Tel/fax:		Cell phone:	
Place of employment:			Tel/fax:
Profession:		Employed as:	
Address for correspondence:			
Degree(s):		Diploma:	date:
University:			
Languages:	level:	Nr. of Cert.:	Date. of Cert.:
MOK ID (if exists):	Social Security Number:	Tax ID:	
For bank transfer:	Address of Bank:		
Account:..... --			

Registration for courses:

Course ID	Credit	Course co-ordinator:	Course title:

Pécs, 20

.....
signature

Titkársági használatra	Átvette:	Érkezett:
Adatbevitő:	Rögzítés dátuma:	Ellenőrizte:
Megjegyzés:		



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Documents needed for admission

Documents needed for every registration:

At the registration you have to provide a copy of cheque stub certifying payment of REGISTRATION FEE.

Documents needed for the first registration:

1. 3 photos (for index and student card)
2. ... Ft for the index
3. „Agreement for co-operation between the doctoral candidate, supervisor and department” signed by the right persons.

Titkársági használatra	Átvette:	Érkezett:
Adatbevivő:	Rögzítés dátuma:	Ellenőrizte:
Megjegyzés:		