Adresát:

Akademie výtvarných umění v Praze

Studijní oddělení

U Akademie 4, 170 00 Praha 7

## Žádost o uznání zahraničního středoškolského vzdělání a kvalifikace

Application for the recognition of foreign secondary education and qualifications

podle § 48 odst. 4 písm. e) zákona č. 111/1998 Sb., o vysokých školách   
according to § 48 paragraph 4 point e) Act No. 111/1998 Coll., Higher Education Act

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| **Jméno a příjmení držitele diplomu/** Name and surname of diploma holder | | |
|  | |  |
| Státní příslušnost/ Nationality | Datum narození/ Date of birth | |

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| **Adresa trvalého pobytu (nemá-li žadatel trvalé bydliště v ČR, uvede adresu v zahraničí)**  Address of permanent residence (if the recipient has not permanent address in Czech Republic, specify the address abroad) | |
| **Ulice/** Street |  |
| **Město/** City | **PSČ/** Zip code |
| **Stát/** Country | **e-mail: tel. /** Phone |

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| **Absolvovaná škola** / Graduation School |  |
| **Název školy: /** School name |  |
| **Webové stránky školy: /** School website |  |
| **Sídlo (město): /**  Residency (city): | **Sídlo (stát):/**  Residency (country): |
| **Datum zahájení studia: /**  Date of enrollment: | **Datum ukončení studia:/**  Date of graduation: |
| **Název studijního programu, název studijního oboru: /**  Study program, Field of Study | |

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| **Adresa, na níž má být rozhodnutí zasláno (nemá-li žadatel trvalé bydliště v ČR, uvede adresu v zahraničí)**  Address to which the decision should be sent (if the recipient has no permanent address in Czech Republic, indicate the address abroad) |

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| --- | --- | --- | --- |
| **Jméno a příjmení** Name and surname |  | | |
| **Ulice /** street |  | | |
| **Město /** city |  | **PSČ/** Zip code | **Stát /** country |
| **Kontakt na zmocněnce**  Contact to the proxy **tel. /** Phone e-mail: | | | |

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| **I confirm that since now was not my foreign university education recognized and that I did not request for the recognition of foreign higher education and qualifications at any other university in ČR.** | |
| **Datum/** Date | **Podpis žadatele/** Signature of the applicant |
| **Please, enclose the following documents** | |
| 1. Certified copy of your diploma. | |
| 1. Certificate of the content and scope of education completed at a foreign school. | |
| 1. Official translations (by court interpreter or by Czech Embassy) of the documents (1) and (2). | |
| 1. Power of attorney for the applicant’s representative in case the diploma holder authorized another person to act on their behalf. | |