

**Request form for transferring (It is obligatory to fill in)**

**REQUEST FOR TRANSFERRING**

Name: \_\_\_\_\_

National student ID (oktatási azonosító): \_\_\_\_\_

Place and date of birth: \_\_\_\_\_

Mother's name: \_\_\_\_\_

Identity card No.: \_\_\_\_\_

Citizenship(s) (also the date of receiving): \_\_\_\_\_

Permanent address: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Phone number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**The data of the institute where the applying student studies at present:**

The name of the institute: \_\_\_\_\_

Faculty: \_\_\_\_\_

Study program: \_\_\_\_\_

Specialization: \_\_\_\_\_

Training: BSc / MSc (please give it by underlining)

Full-time training / Part-time training (please give it by underlining)

Mailing address: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Starting date of your studies (academic year, semester): \_\_\_\_\_

Which year according to the study plan are you in at present? \_\_\_\_\_

The grade-point average of your last active semester in the case of MSc program /

The grade-point averages of your last 2 active semesters in the case of BSc program (minimum requirement: 3,51): \_\_\_\_\_

Financial form (please give it by underlining):

Tuition fee paying / Scholarship (Stipendium Hungaricum or other) recipient

**The above named student requests for transferring to the Faculty of Health Sciences and Social Studies, University of Szeged**

to the Basic training: \_\_\_\_\_

Specialization (study program): \_\_\_\_\_

Level of training: BSc / MSc (please give it by underlining)

Full-time training / Part-time training (please give it by underlining).

Justification: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date

\_\_\_\_\_

Student's signature

**Obligatory attachments** (Please below indicate the documents attached to the request):

- A valid Student legal status confirmation form issued not earlier than 15 days before the submission. The confirmation form has to also certify that the student is not under a dismissal process and that a disciplinary procedure has not been taken against the student.
- A certified or an original copy of the student's transcript including the name, the credit point, the lesson number and the result/ grade of the accomplished courses and the averages of the semesters.
- A certified and detailed syllabus of each accomplished subject.
- A certificate about the financial form of the student's studies issued by the Registrars' Department of the sending institution.
- Other: \_\_\_\_\_

Checking by the Admission Officer

The required documents are attached: YES / NO

Missing documents: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date

\_\_\_\_\_

signature of the officer

Mailing address: SZTE ETSZK Admission Officer, 6726 Szeged, Temesvári krt. 31.