Opole, date………………………

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| --- | --- |
| Forename and surname: |  |
| Student registration number: |  |
| Year and field of study: |  |
| Telephone number: |  |
| E-mail address: |  |
| Address for correspondence: |  |

dr Grzegorz Haber

Fields of Study Coordinator

Faculty of Political Science

and Social Communication

**Application for permission**

**to resit a final test before a board**

Pursuant to § 24 of the University of Opole Study Regulations (Appendix to uniform text: Resolution No. 167/2020-2024 of the Senate of the University of Opole of 11 April 2022), I hereby request permission to resit a final test before a board in the following subject:

…………………………………………………………………………………………………...

Justification for the application:

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Respectfully yours

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Faculty Dean’s decision:

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