………………………………………………………  Wrocław, …................... 20.........

name and surname

………………………………………………………

field and degree of studies

………………………………………………………

year and semester of studies

………………………………………………………

Faculty of Earth Sciences and Environmental Management UWr

Vice-Dean for teaching

dr hab. Waldemar Spallek

index number

………………………………………………………

email address

………………………………………………………

phone number

**Application for the resumption of studies in order to approach the diploma exam**

I request permission to resume full-time studies in the field of …............... in semester …........ in the academic year of 20……… / 20……… in order to submit my thesis titled: ……………………………………………………………………………………………………………………………………………………………………………………… and to undertake the diploma exam.

.........................................................

applicant’s signature

**Approval of thesis and exam date by the supervisor**

I declare that the thesis with the above-mentioned title is completed and is ready to undergo the certification process. The diploma exam will take place on …………………………………………………………………………

…………………………………………………………………………

date and signature of the supervisor