

.....
(Name and Surname)

Poznań,
(date)

.....
(Institute)

.....
(Year of Study)

.....
Specialisation (Instrument)

APPLICATION FOR A FOREIGN LANGUAGE COURSE TRANSFER

To

.....

Head of the Institute of

The I.J. Paderewski Academy of Music in Poznań

I hereby request for a consent to transfer the (name of foreign language) course
from semesterof academic year/.....
to semesterof academic year/.....
for the following reason(s):

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

Consent of the Foreign Language Study Centre Coordinator

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Notation of the Head of the relevant Institute

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