# Registration form

# Membersip of the deputy assembly for the Student Union of

# the Facultyof Health Sciences of the Univesity of Pécs

Name:

Student ID (Neptun code):

E-mail address:

Telephone number:

Major:

Training Centre (Kaposvár/Pécs/Szombathely/Zalaegerszeg):

Appendices submitted (please mark each of the submitted appendices with an X):

|  |  |
| --- | --- |
| Curriculum vitae |  |
| Motivational letter |  |
| Certificate of student status issued by the Registrar's Office |  |

The applicaiton must be submitted in the office of the Student Council of the PTE ETK (7622 Pécs, Szepesy Ignác utca 1-3.), the latest 13th October 2017 12:00.

Signature of the applicant

Date:

|  |  |
| --- | --- |
| Date and time of the submission of the application (date, hour, minute): |  |
| Signature of the receiver (PTE ETK officer, presidential deputy): |  |