

AUTHORIZATION

I, the undersigned

Name:Surname:

series and number of identity document:.....

residing in:

I authorize

Ms/Mr Name:Surname:

series and number of identity document:.....

residing in:.....

to act on my behalf in performing the required actions related to the recruitment process for studies at the Rzeszów University of Technology for the academic year 2024/2025, in particular to:

- delivery of a secondary school certificate or diploma and other additional documents required from the person admitted to studies,
- signing all documents related to the study, in particular the personal questionnaire (SIR application form),
- enrolment in the first year of study,
- receipt of a referral for medical examination,
- receipt of the decision not to enrol to studies and filing an appeal.

Verte!

This authorization is valid only with the original or a copy of the candidate's identity document (identity card or passport).

.....date

(place)

.....

(applicant's signature)

Confirmation of the authenticity of the signature.

.....date

(place)

.....

(signature and stamp)