APPLICATION FORM

1. PERSO	NAL DATA			, v.				•			
First na	ame _		_ _	_					_		_
Surnan	ne _			_ _							
Date o	f birth (da	ay, month	n, year)	ll.	_ _ _	. .	_ _ _	.			
Countr	y and city	of birth									
Corres	pondence	address	<u> </u>	_ -							
PESEL	(Personal	Identific	ation N	umber)	<u></u>	_ _					
Mobile	tel. num	ber									_
E-mail	address										
	I agree that r	my data will	be stored i	n the registe	er. The data will be	used exclus	vely to conta	ct the student	and prepare	e the certificat	e.
2. CONCE	RNS ONLY	STUDENT	S OF TH	E SCHOO	L— please circ	le the gro	up				
AT2	AT3	A1.2	A2.1	A2.2	A1 (II semester)	A2	B1	B1+	B2	C1	C1 ⁺ (c)
2 CONCE	DAIC NIEW	CTUDENT	°		h						
	RNS NEW		s – pieas	se circie t	ne group						
<u>no kno</u>	wledge of	German									
A1											
some k	<u>nowledge</u>	of Germa	<u>ın</u>								
	A1 mester)	A2	В	1	B1+ I	32	C1	C1 ⁺ (c)			
C1 ⁺ (c) – c	conversation	nal course,	taking C2	Exam Mod	dul Sprechen po	ssible					
∕ DEDEN	DING ON T	THE DECIT	ITS OE TI	TE DI VCE	MENT TEST, I	AGDEE TO		GRUID			
			LI3 OI II	IL FLACE		AGNEE 10	JOHN THE	. GROOF			
	higher leve lower leve										
5. SUITABLE DAYS OF CLASSES			s N	lon&Thu	Tue&Fri	Wed&S	21 1	any day without Saturday		Saturday and any day of the week	
I agree to t	the (free of	charge) us	e of my aı	pearance	only for the sc	hool advert	ising purpo	oses related	to the scho	ool events.	
-	-				-		- • •				
Lublin, da	te									 nature	