Poljanski nasip 2 SI-1000 Ljubljana, Slovenia phone: +386 1 420 31 00 fax: +386 1 420 31 15 referat@pf.uni-lj.si www.pf.uni-lj.si



NAME SURNAME **STREET** 9999 PLACE **COUNTRY**

Ref. No: NUMBER Ljubljana, DATE

CERTIFICATE OF REGISTRATION (STUDY PROGRAMME OF FURTHER TRAINING)

Registration number

REGISTRATION

NUMBER

Date of birth

DATE OF BIRTH

Place of birth

PLACE OF BIRTH

Surname, first name

SURNAME, NAME

Country of birth

COUNTRY OF BIRTH

Type and cycle of study Academic year Academic year Type and cycle of study

Study programme Study programme Orientation/specialization/module/scientific field Orientation/specialization/module/scientific field



DEAN Dean