

Student's name: _____

Year of study: _____

Semester: _____

EXAM REGISTRATION FORM

I hereby register for the exam in compulsory / elective (circle) course from the winter / summer (circle) semester of the 2016/2017 academic year.

Course: _____

for¹:

EXAMINATION PERIOD	EXAM DATE	APPLICATION DEADLINE
1st period	a. 07.06.2017. (1st date) b. 14.06.2017. (2nd date)	26.05.2017.
2nd period	a. 25.08.2017. (1st date) b. 31.08.2015. (2nd date)	14.08.2017.
3rd period	a. 20.09.2017. (1st date) b. 27.09.2017. (2nd date)	08.09.2017.
4th period	a. 18.10.2017. (1st date) b. 25.10.2017. (2nd date)	06.10.2017.

Student's signature

Signature (approval) of the course teacher²:

¹ Circle the chosen exam date.

² Approval of the course teacher can be sent to the email of the Student Administration Office dsk@kifst.hr.