Kraków, on …………………………. (date)

Student’s name and surname ….............................………………

Full-time / Part-time studies

Field of study/study major………………………………………………………

Year ........... , semester ..............., cycle .....................

No. of Student album/register …………………………………………………

Contact phone number ………………………………………………………………

Address for correspondence ………………………………………………………

**Rector’s Representative**

**Krakow University of Economics**

I wish to kindly request an employee discount for the semester tuition fees for studying at the Krakow University of Economics.

I am an employee of …………………………………………………………………………………………….[[1]](#footnote-1)1.

I hereby declare that I am aware that the discount is valid only during the period of my employment at the University under an employment contract, which means that in the event of termination of the employment contract with the University, I undertake to pay the full fee for the period of education remaining after the termination of that employment contract.

………………………………….…

Student’s signature

Appendices:

Certificate issued by the proper employee services unit at the Krakow University of Economics

Opinion issued by the Unit for Student Accounts and Settlements

…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….……

Decision by the Rector’s Representative

……………………………..…………………………………………………………………………………………………………………….

.…………………………………….

Signature of the Rector’s Representative

1. 1 Please indicate the unit in which you are employed [↑](#footnote-ref-1)