UNIVERSITY OF SZEGED, Albert Szent-Győrgyi Medical School, Foreign Students' Secretariat COURSE REGISTRATION PLAN: `52023/2024-1

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Family name(s):	Program: MEDICINE				
Given name(s):		Began studies in 20/20 (e.g.: 2022/2023)			
Date:		Please place a √in the appropriate box.			DO NOT PUT ANYTHING IN THIS COLUMN
Course code lecture/practice	Course title	First course registration	Complete repeat	Examination course find out 1) if it is available as an examination course, and 2) if you are eligible to take it	Examination chances exhausted
Neptun course registrati	on deadline: September 24, 2023				
Registering for every cou	rse on Neptun is the students' obligation	and responsibili	ty.		
Remarks:					
first semester of the acade any modification to my or request and that I have t that it is my responsibility every compulsory subjections.	ning this form I declare that the above list lemic year 2023/2024. I understand that becomes registration on Neptun. I declare to register for every course on Neptun regity to check for the preconditions of the cot—including both its lecture and its practions and its practions of the commended to begin my examination per	I am obligated to a counderstand that ardless of what I pourse(s) I put on tice(s)—in the ap	fill in a new cours t this current docu put on this docun this plan, and tha opropriate semest	se registration pla ument is <u>NOT</u> a co nent. I also declaro t I am responsible er as per the curri	n in case I make ourse registration e to understand e to register for loulum. I
I am eligible for a 50% red	uction of my tuition fees that I hereby reque	est by checking thi	is box: \square		
See University of Szeged, Al	bert Szent-Györgyi Medical School - Regulation	ns on the reduction (of tuition fees.		
	Student's signature (read the declaration	above before signing	g):		
FOR OFFICE USE ONL		9(<i></i>		
Tuition fee calculated:		Academic Officer:			
		Date:			