

Łódź, .....

.....  
First name and Family name

**Faculty of Management, UL**

**Study Programme:** .....

**Specialisation:** .....

**Full-time studies / Part-time studies\*; 1st-cycle studies / 2nd-cycle studies\***

.....  
year of studies      student's album number

.....  
address for correspondence, phone number

**Vice-Dean for Student Affairs  
Faculty of Management, UL**

**CONCERNS THE CHANGE OF A STUDY PROGRAMME WITHIN THE FACULTY OF MANAGEMENT, UL**

I am asking to be transferred from the Study Programme  
..... in the full-time / part-time\* mode in the 1st-cycle / 2nd-  
cycle\* studies to the Study Programme ....., specialisation  
..... as of the 20..... / 20..... academic year.

The justification: .....  
.....  
.....

I oblige myself to pass any possible programme differences within the set deadline.  
I am kindly asking that my request be considered positively.

.....  
the student's signature

**To be filled and confirmed by the Dean's Office:**

The student has passed ..... semesters of studies and obtained the average of .....

.....  
date and signature of the Dean's Office  
employee

**Decision of the Vice-Dean for Student Affairs at the Faculty of Management UL:**

I do agree. / I do not agree\*.

Łódź,.....

.....  
the Vice-Dean's signature

The decision was announced to the student on .....

.....  
the student's signature

\* cross out one of the options