



Lodz, (date).....

**AKADEMICKIE  
CENTRUM  
WSPARCIA**  
Uniwersytet Łódzki

.....  
*(Student's name and surname)*

**Student's number:** .....

**Year and field of study:** .....

**Study mode:** full-time (daytime) / extramural (evening/weekend)<sup>1</sup>

Telephone number (voluntary): .....

University e-mail (obligatory): .....

**Dr Anna Gutowska- Ciołek**  
**Head of the**  
**Academic Support Centre of the University of Lodz**

### **APPLICATION FOR TRANSPORT ORGANISATION**

I would like to kindly request the organisation of free transport from my place of residence to the University of Lodz and back (within the administrative boundaries of the city of Lodz) during the academic year ..... / ..... .

At the same time, I undertake to submit the Subscriber Record Sheet (Transport Order Card) to the Academic Support Centre by the 18<sup>th</sup> day of each month preceding the month of the need to organise support. After exceeding the agreed deadline, the service will not be performed.

I justify my request with .....

.....

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Best regards,

.....  
*(Student's signature)*

.....  
<sup>1</sup> Mark as appropriate  
phone: +48 42 665 51 65  
ul. Pomorska 152, 91-404 Łódź  
e-mail: acw@uni.lodz.pl