



# LATVIJAS UNIVERSITĀTE

## GUEST STUDENT'S / VISITING STUDENT'S REGISTRATION FORM FOR COURSES

Agreement No.	date. month. year

**Fill in the blue fields only, save in PDF format, electronically sign, and send by e-mail!**

Identity No. (LV):		Gender:	<input type="checkbox"/> Female	<input type="checkbox"/> Male
Family name:		Name:		

DETAILS OF IDENTITY DOCUMENT		Document type:	<input type="checkbox"/> Passport	<input type="checkbox"/> Identity card	
Series and No.:		Date of issue:		Date of expiration:	
Issued by:			date. month. year		date. month. year

CURRENT ADDRESS:	Zip code:	EMPLOYMENT	Name of the Company:
Street, house, flat:			
Village, Town:		Position held:	
Area, region, Country:		Phone:	
Mobile phone:		e-mail:	

LEVEL OF ACQUIRED EDUCATION:	<input type="checkbox"/> Secondary	<input type="checkbox"/> Secondary vocational	<input type="checkbox"/> 1.level higher professional
	<input type="checkbox"/> Bachelor	<input type="checkbox"/> Master	<input type="checkbox"/> 2.level higher professional

I will pay the registration fee in order to get the student card

I certify that the information provided in this form is correct:	Signature:		date. month. year
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### REGISTRATION APPLICATION FOR STUDY COURSES:

Course code	Course name	Credit points	Confirmation
1.			<input type="checkbox"/> Saskaņots
2.			<input type="checkbox"/> Saskaņots
3.			<input type="checkbox"/> Saskaņots
4.			<input type="checkbox"/> Saskaņots
5.			<input type="checkbox"/> Saskaņots
6.			<input type="checkbox"/> Saskaņots
7.			<input type="checkbox"/> Saskaņots
8.			<input type="checkbox"/> Saskaņots
9.			<input type="checkbox"/> Saskaņots
10.			<input type="checkbox"/> Saskaņots

Faculty confirmation signature / Fakultātes pārstāvja paraksts par saskaņojumu:		
	Vārds Uzvārds	

TUTION FEE FOR THE COURSES / MAKSA PAR STUDIJU KURSU APGŪŠANU:	in figures / cipariem:	
in words / vārdiem:		

Dokumentus pieņēma un pārbaudīja:		
	Vārds Uzvārds	datums. mēnesis. gads