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**APPLICATION TO HAVE THE TIME LIMIT TO SUBMIT THE DOCUMENTS FOR THE RECOGNITION OF FOREIGN UNIVERSITY EDUCATION AND QUALIFICATIONS IN THE CZECH REPUBLIC EXTENDED**

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| ***Applicant’s details*** | First name  | Surname | Surname at birth |
| E-mail      |
| ***Attorney-in-fact\**** | First name\* | Surname\* |
| E-mail\*      |
| ***Invitation to submit documents*** | Ref. No. | Date of invitation |
| ***Please extend the time limit to submit documents until:*** |
| ***Reasoning:***  |
| Date | Signature |