# PAVOL JOZEF ŠAFÁRIK UNIVERSITY IN KOŠICE

## Faculty of Medicine





### ANNOUNCEMENT

#### Registration to the academic year 2009/2010 is as follows:

September 03, 2009 – year 6 GM at the Study Department

September 04, 2009 – year 2 GM, DM – in the lecture room P2

September 07, 2009 – year 3 GM, DM – in the lecture room P1 (from 10.00 o'clock)

September 08, 2009 – year 4, 5 GM, DM, year 6 DM at the Study Department

September 09, 2009 – year 1 GM, DM – in the lecture room P3

**Registration** will take place in a Lecture room announced few days before Registration between 9.00 a.m. – 12.00 a.m., for the students in the year 1 between 9.00 a.m. - 2.00 p.m. Registration fee: 14 EUR

Student card fee (new card): 24 EUR. The fee is to be paid by money order type "U", account number 7000074351, bank code 8180, Variable symbol: 9210 with addition of the date of birth in form DDMMYY (e.g.9210080587), Reference number 3894391, recipient: Správa AIO UPJŠ, Šrobárova 2, 041 80 Košice, Payment purpose: PIK 1

Student card prolongation: 8 EUR. The fee is to be paid together with registration fee payment by Money order type "U" (available at Study Department UPJŠ MF)

**Substitute date of Registration** is on September 18, 2009 (written request is required).

Registration fee: 19 EUR

Student card fee (new card): 24 EUR. The fee is to be paid by money order type "U", account number 7000074351, bank code 8180, Variable symbol: 9210 with addition of the date of birth in form DDMMYY (e.g.9210080587), Reference number 3894391, recipient: Správa AIO UPJŠ, Šrobárova 2, 041 80 Košice, Payment purpose: PIK 1

Student card prolongation: 8 EUR. The fee is to be paid to together with registration fee payment by Money order type "U" (available at Study Department UPJŠ MF)

#### The students are required to submit at the Registration:

1. index (students in the year 2 - 6) with the earned credits and passed examinations specified in the academic year 2008/2009.

Minimum credits for registration to the higher year is 40, maximum 90.

- 2. proof of tuition fee payment
- 3. proof of registration fee payment 14 EUR (in case of the substitute registration date the fee is 19 EUR)
  - paid by money order type "U" at any post office
  - account number 7000078360/8180
- 4. confirmation in the indexes:
  - a) **new coming students** entrance medical check can be provided by MUDr. Bachledová whose Office is located on the 7<sup>th</sup> floor of the Policlinics, phone number: 640 2710 (the copy of medical certificate from Stredisko cudzokrajných chorôb /Department of Foreign diseases required by Immigration police in the case of non UE contries would be helpful)
  - b) **students in the year 2** confirmation about Hepatitis vaccination (possible to be provided by MUDr. Bachledová whose Office is located on the 7<sup>th</sup> floor of the Policlinics, phone number: 640 2710)
  - c) **students in the year 3** confirmation about Mantoux vaccination (possible to be provided by MUDr. Bachledová whose Office is located on the 7<sup>th</sup> floor of the Policlinics, phone number: 640 2710)
  - d) **students in the year 4** confirmation about preventive check up (possible to be provided by MUDr. Bachledová whose Office is located on the 7<sup>th</sup> floor of the Policlinics, phone number: 640 2710).

The university student card will be prolonged or you apply for the new card (in case you are not card's holder yet) at the date of Registration.

The academic year 2009/2010 begins on September 16, 2009. The students in the year 6 of General Medicine start on September 07, 2009.

**Prof. MUDr. Leonard Siegfried, CSc.**Dean of MF UPJS

UPJŠ in Košice The Faculty of Medicine

Academic year 2009/2010

Programme of Study: Form of study: Full time/Part time

### **REGISTRATION FORM**

Year of study:

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Surname: Degree:	First name:					
Maiden Name:	Birth No					
Date of birth:	Place of birth:					
Citizenship:	Nationality:					
Marital status: single married	divorced					
Passport/ID card number:	Country and Date of Issue:					
Stay parmit No.	Valid until:					
Stay permit No:	vanu uncii.					
Permanent address:						
Street:	Telephone No.:					
City/Post code:	Mobile phone No.: e-mail:					
Country:	e-man.					
Temporary address (a hall of residence):						
Street:	Telephone Number:					
City:	Post code:					
Name of the house/flat owner:						
The person to be contacted in case of emergency:						
Name:						
Phone No.:	e-mail:					
Student Card Number:						
<ul> <li>I agree that any Personal Data Processing concerning my study may be used for official purposes only, according to Slovak Law No 428/2002 Coll.</li> </ul>						
<ul> <li>I confirm that all the data given is true, I have not knowingly withheld any important information and I am aware of the consequences resulting from any false information given.</li> </ul>						
Any changes to the above must be reported to the Study Department						

### promptly!!!

In Košice	Signature of Student
Registration stamp	