

APPLICATION FORM

for the starting course for new students of Third Faculty of Medicine

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Place/Address: **Výcvikové středisko UK**
Dobronice u Bechyně, 381 62 Stádlec

Map coordinates: **N 49°21'3,45" E 14°30'42,78"**

Date: **7th September 2016 - 10th September 2016**

Price: **free of charge**
(three meals a day, beginning with supper, packed lunch on the last day)

It is prerequisite to send this application form to the Study Department
(Third Faculty of Medicine, Study Department, Ruska 87, 100 00 Prague 10, Czech Republic)
until 20th July 2016 at the latest, if you want to take part at this course!

Family name(s):

First name(s):.....

Date of birth (day, month, year):

Present mailing address:

Permanent address (if different):

Phone or Mobil: E-mail address:

T-shirt: **S M L XL**

Health diet: **NO / YES (which one)**.....

I certify that I acquainted with conditions of participation in this course,

Date: Signature:
