Gdańsk, date …………………………………

First and last name: ……………………………………………………

Student’s registration No.: ……………………………..…………………………..

Field of study: ………………………........................................

Degree: …………………………………………………..

Form of study: full-time / part-time \*

Year of completion: ……………………………………..

**To the Dean of the UG Faculty of Chemistry**

A P P L I C A T I O N

I would like to request an additional copy of my diploma in (language)……………………………………….. pcs. …….. .

I would like to request an additional copy of my diploma supplement in English pcs. .......... .

---------------------------------

(legible signature)

\*Cross out where not applicable

**NOTES**:

1. If applying for a supplement in English, a printout of the translation of the title of the diploma thesis should be attached to the application - applies only to theses defended before 1 June 2021.
2. The fee for 1 document (diploma or supplement) is 20 PLN.