**University of Chemistry and Technology Prague**

Department of Physical Education and Sport

Name: ………………………………….. Date of birth: …………………………….

Surname: ……………………………….. Faculty: ………………. Year of study…………

 **Request for**

**………………………………………………………………………………………………………………….**

**Reason of request:**

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Date……………………….

Sign: …………………………….

Head of department statement:

 ………………………………………………..

 Stamp and signature