\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ JMBAG: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(ime i prezime)

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(adresa stanovanja: broj pošte, mjesto, ulica i broj)

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(broj telefona - mobitela; e-mail)

**SVEUČILIŠTE JOSIPA JURJA**

**STROSSMAYERA U OSIJEKU**

**GRAĐEVINSKI I ARHITEKTONSKI**

**FAKULTET OSIJEK**

**OSIJEK, Ulica Vladimira Preloga 3**

Predmet: Zahtjev za mirovanje obveza

Studij: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Godina studija: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Molim da mi se odobri mirovanje obveza u akademskoj godini \_\_\_\_\_\_\_\_\_/\_\_\_\_ zbog \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

(navesti razlog za opravdanje mirovanja obveza)

Osijek, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Potpis studenta: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Privitak:

1. potvrda liječnika obiteljske medicine
2. potvrda o boravku na međunarodnoj razmjeni
3. ostalo: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**ODLUKA**:

1. Prihvaća se zahtjev za mirovanje obveza
2. Odbija se zahtjev za mirovanje obveza zbog: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Odbacuje se zahtjev za mirovanje obveza zbog: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Predsjednik/ca Povjerenstva

za studentska pitanja:

U Osijeku, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_