



**Towards
 Dean's Office of the Faculty of Business**

The undersigned....., student enrollment no.....

Specialization	
Level (Bachelor's/Master's)	
Form of education (Full-time)	
Year of study	
Personal Identification Number/ Passport Number	
Telephone	
Email	

I kindly request your approval to take the following exams in the additional retake exam session (clearance session) scheduled for June 2026:

No. crt.	Course subject	No. of credits <i>(to be filled in by the secretariat)</i>	Amount <i>(to be filled in by the secretariat)</i>
1			
2			
3			
4			
5			

Data: _____

Signature: _____