„DUNĂREA DE JOS" UNIVERSITY OF GALAȚI
Faculty of_____
Academic year 2026-2027

***Financial status**:*
*Budget(**B**) / tuition fee (**T**)* ☐
*CPL (**L**) / CPV (**V**) / Scholarship holder (**R**) / CPNV (**N**)* ☐
***Mode of study**:*
*Full-time attendance (**F**)/at distance (**D**)/reduced frequency (**FR**)* ☐
Secretary of the faculty,

To the Rector,

I, the undersigned, _____, hereby request the enrolment in the year of studies _____ group _____ cycle of studies*: Bachelor degree ☐ /Master degree ☐**,** field of study_____, study programme_____, for the Faculty of _____,
- mode of study*: full-time attendance ☐, at distance ☐, reduced frequency ☐,
- financial status*: budget ☐, tuition fee ☐, own expense in lei ☐, own expense in euro ☐, scholarship holder of the Romanian state ☐, budget without scholarship ☐.

Personal data:
Name according to the birth certificate: _____
Current family name: _____
(after marriage, adoption, modification at request, according to the proving document)
Surname: _____
Personal identification number: ☐☐☐☐☐☐☐☐☐☐☐☐☐
- Date of birth: year _____ month _____ day _____
- Place of birth: country _____ region/country's code _____
(the code will be filled in only by foreign student)
city _____.
- Sex: female ☐/male ☐ .
- Civil status: married ☐/ single ☐/ divorced ☐ /widow ☐.
Special social status: orphan by one parent/by both parents/☐, comes from orphanages☐, comes from a single parent family ☐/student with dissabilities☐.
- Citizenship: Romanian with residence in Romania ☐/ Romanian with residence abroad ☐/ other citizenships _____, previous citizenship _____
(where applicable)
- **Ethnicity**: _____.
- Permanent residence:
country _____ region/country's code _____ city/village _____
(country's code will be filled in only by foreign students)
street _____ no. ____ block _____ floor _____ apartment _____ sector ____
ZIP code ☐☐☐☐☐☐ phone no. _____ e-mail _____.
- Identity card/Passport: series _____ no. _____ issued by_____
(for Romanian students) (for foreign students)
date of issue _____ expiry date _____.

<u>Data about the parents</u>:
-Father: name: _____, surname_____,
profession _____, workplace _____,
-Mother: name: _____, surname_____,
profession _____, workplace _____.

_____
* - it will tick the correspondant variant

Data related to schooling :

-The admission to the study programme has been made by*:

(to be filled in only by admitted candidates in the academic year 2026-2027)

contest and enroled in the 1st year ☐ / contest and enroled in a higher year (continuation of studies ☐ / second faculty ☐) / Romanian government scholarship holder ☐ / preparatory year ☐.

(only for foreign students)

-Academic status*:

passed ☐/ passed in the following year with remaining credits ☐ / failing to pass the year ☐ / temporary suspension of studies ☐ / postponed ☐ / enroled in additional year ☐ / re-enroled in additional year ☐ / beneficiary of permanent mobility within the university ☐ / beneficiary of permanent mobility, coming from the University_____, Faculty of _____ _____, study programme _____ ☐ / enroled for the first time as a student ☐ / (coming from the current promotion ☐ / previous ☐)/ enroled to a second study programme within the same cycle of academic studies ☐/ resumption of studies ☐/ re-enroled ☐.

Data related to previous training:

(for High School graduates)

Pre-university graduated studies, High School level:

Name of the High School: _____ _____

country _____ city _____

region _____ profile/field of study _____ duration of studies _____ graduation year _____ mode of study: daily / in the evenings / reduced frequency / at distance.

Type of diploma _____

(baccalaureate / equivalence for graduates abroad)

series _____ *number*_____

issuer: _____

year of issue _____, *transcript of grades accompanying the diploma* _____

number /series: _____ /_____

(recognised / equivalent diploma – for graduates abroad)

Secretary of the Faculty,

Data related to previous training:

(for high education graduates)

Graduated academic studies:

Country_____city_____ region_____name of the graduated institution_____ Faculty of _____ field of study_____ study programme_____ Title awarded _____ mode of study: daily / in the evenings / reduced frequency / at distance, financial status: budget / tuition fee, duration of studies _____

(years / semesters – where applicable)

Graduation year _____.

Type of diploma/name _____

(diploma / bachelor/graduation / equivalent for graduates abroad)

series _____ *number* _____

issuer _____

year of issue _____, diploma supplement / *transcript of grades acompanying the diploma* _____*number/series:*_____/ _____

(recognised / equivalent diploma – for graduates aborad)

Secretary of the Faculty,

Date_____

Student's signature,

_____

* - it will tick the correspondant variant