**UNIVERZITET U SARAJEVU** - **FAKULTET/AKADEMIJA**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Zahtjev za ekvivalenciju ranije stečene akademske titule, odnosno naučnog i stručnog zvanja**

***Application Form for Equivalence Performing of Ante-Bologna Obtained Higher Education Qualifications (not based on ECTS)***

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| --- |
| **I - PODACI O PODNOSITELJU ZAHTJEVA/ APPLICANT INFORMATION** 1. OSOBNI PODACI PODNOSITELJA ZAHTJEVA / *APPLICANT PERSONAL INFORMATION*
 |
| Ime / *First name* | Prezime i rođeno prezime / *Surname*  |
| Datum rođenja / *Date of Birth* | Grad i država rođenja / *City and Country of Birth* |
| Državljanstvo / *Citizenship* | Spol/*Sex*: Žensko / *Female*  Muško / *Male* |
| Ulica i broj / *Street Address*  | Poštanski broj i mjesto / *Postal* *code, City* |
| Država / *Country* | E-pošta / *E-mail* |
| Telefonski broj / *Phone Number* | Broj mobilnog telefona / *Cellphone Number* |
| 1. UVJERENJE O EKVIVALENCIJI DOSTAVITI NA ADRESU (zaokružiti) / *DELIVER EQUIVALENCE FORM TO THE FOLLOWING ADDRESS (circle):*
 |
| * Podnositelja zahtjeva / *Applicant’s ADDRESS*
* Neku drugu / *Other*
* Ime i prezime / *Name and Surname* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Ulica i broj / *Street Address:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Poštanski broj, mjesto i država /

*Postal Code, City, Country* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **II - PODACI O RANIJE STEČENOJ AKADEMSKOJ TITULI, ODNOSNO NAUČNOM I STRUČNOM ZVANJU ZA KOJE SE TRAŽI EKVIVALENCIJA/ *INFORMATION ABOUT HIGHER EDUCATION DOCUMENT FOR WHICH EQUIVALENCE PROCEDURE IS REQUESTED*** |
| Naziv fakulteta/akademije / *Faculty/Academy* *Name*  |
| Adresa fakulteta/akademije / *Faculty/Academy* *Address*  |
| Grad / *City*Država / *Country* |
| Web adresa fakulteta/akademije / *Faculty/Academy Website* |
| Naziv studijskog programa (odsjek,grupa,smjer) / *Study program (Dept.) Name* |
| Naziv ranije stečene akademske titule, odnosno naučnog i stučnog zvanja čija ekvivalencija se traži / *Name of Previously Acquired Academic Title, or Vocational Title Demanding Equivalence Procedure respectively*  |
| Naziv javne isprave kojom se dokazuje ranije stečena akademska titula, odnosno naučno i stručno zvanje / *Name of Document Proving the Obtaining of Previously Acquired Academic Title* |
| Naziv javne isprave kojom se dokazuje završeno razdoblje studija (uvjerenje o položenim ispitima) *Name of Public Documents Proving the Completed Studies (Passed Exams Certificate)*\**Kada je svrha podnošenja zahtjeva ekvivalencija studija When the request is submitted for the purpose of equivalence*  |
| Vrsta studija / *Type of Study*:* Univerzitetski / *Academic*
* Stručni/strukovni / *Professional/Vocational*
 |
| Službeno trajanje studija (broj godina/semestara/) *Official study program length (years / semesters /)* |
| Datum upisa na studij */ Enrollment* *Date* /\_\_\_/\_\_\_/\_\_\_\_\_/   |
| Datum završetka studija / *Finishing Study Date* /\_\_\_/\_\_\_/\_\_\_\_\_/ |
| Datum sticanja ranije stečene akademske titule, odnosno naučnog i stručnog zvanja / *Date of Qualification Acquiring (Date of Issuing Higher Education Document)* /\_\_\_/\_\_\_/\_\_\_\_\_/ |
| Dodatni uvjeti sticanja ranije stečene akademske titule, odnosno naučnog i stručnog zvanja (zaokružiti) / *Additional Conditions of Obtaining Previous Academic Title, Scientific or Expert Title** Diplomski rad (*Thesis Title):*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* Završni ispiti / *Final Exams*:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* Drugo / *Other*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  SVRHA PODNOŠENJA ZAHTJEVA / *PURPOSE OF APPLICATION* |
| 1. Ekvivalencija ranije stečene akademske titule, odnosno naučnog i stručnog zvanja sa novim zvanjem /*Equivalence of Previously Acquired Academic Title, or Scientific and Vocational Title with a New Vocation*
2. Ekvivalencija ranije stečene akademske titule, odnosno naučnog i stručnog zvanja za koju je provedena nostrifikacija sa novim zvanjem/*Equivalence of a Previously Acquired Academic Title, or Scientific and Vocational Title for which Nostrification with a New Title has been Performed*
 |

NAPOMENA / *NOTE:*

Za tačnost podataka odgovara podnosilac zahtjeva. The applicant is solely responsible for the accuracy of given information.

Uz zahtjev prilažem slijedeće / with the application form, the following is hereby enclosed:

1. ………………………………………………………………………………………
2. ……………………………………………………………………………………
3. ………………………………………………………………………………………
4. ………………………………………………………………………………………
5. ………………………………………………………………………………………
6. ………………………………………………………………………………………
7. ………………………………………………………………………………………
8. ………………………………………………………………………………………

U / *In :*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (grad C*ity)* (datum , *Date*) (potpis podnosioca zahtjeva/ *Signature of Applicant*)