**Sveučilište Josipa Jurja Strossmayera u Osijeku**

**FAKULTET ZA ODGOJNE I OBRAZOVNE ZNANOSTI**

**IZJAVA O PREUZIMANJU OBVEZE PLAĆANJA ŠKOLARINE**

 **POSLIJEDIPLOMSKOG SPECIJALISTIČKOG STUDIJA**

**Vođenje i upravljanje odgojno-obrazovnim ustanovama**

|  |  |
| --- | --- |
| **OBVEZU PLAĆANJA ŠKOLARINE PREUZIMA** (označiti) |  pristupnik Ime i prezime\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_OIB:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Adresa prebivališta\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  ustanova Naziv ustanove: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_OIB:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Adresa: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(obvezno priložiti i Odluku ustanove o plaćanju) |
| **Napomene:** |  |

|  |  |
| --- | --- |
| Mjesto i datum |  |

 Vlastoručni potpis \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_