**Sveučilište Josipa Jurja Strossmayera u Osijeku**

**FAKULTET ZA ODGOJNE I OBRAZOVNE ZNANOSTI**

**IZJAVA O PREUZIMANJU OBVEZE PLAĆANJA ŠKOLARINE**

**sveučilišnog specijalističkog studija**

***Vođenje i upravljanje odgojno-obrazovnim ustanovama***

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

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| Mjesto i datum |  |

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