## APPLICATION FOR THE RELEASE OF A DIPLOMA DUPLICATE



Signature\_\_

## TO THE RECTOR,

(family name and all given names according to the certificate of birth)  Graduate of the Politehnica University of Timişoara,  Faculty	
☐ Bachelor 5 years (full time / evening courses) ☐ Bachelor 3 years (full time / distance learning) ☐ Master (1 / 2 years) ☐ Advanced studies ☐ Post-graduate	
Calendar year of the completion of the final acade	emic year
Calendar year of the conferring of the degree	, month
	with university no on the date t is (check the appropriate box):  □ Damaged □ Plasticized  ss or destruction of the diploma the original)  sticised) or Copy of the original document (if lost or (check the appropriate box):  ys after the application).
Contact data of the applicant:  Phone number  E-mail address	_
Date:	Signature,
Note on the processing and storage of personal data	
The undersigned	, I am aware that the Politehnica University of Timisoara ailable on the obtaining of the study documents / university n the protection of individuals with regard to the processing of

Note:

<sup>-</sup> Study documents shall be released with a fee. Please consult Fees for the release of study documents.