



UNIVERSITY OF VETERINARY SCIENCES BRNO
Faculty of Veterinary Medicine
Admissions and Study Office

REQUEST FOR NECESSARY ADJUSTMENTS TO THE ADMISSIONS PROCEDURE

Full name:

Date of birth:

Application no:

Study programme: Veterinary Medicine

I hereby request the following adjustments to the admissions procedure.

(give details below, stating the reasons for the adjustments)

Appendix to this form (select from options)

- ☐ Medical report from a specialist
- ☐ Report from other specialized institution

Date:

Signature: