Faculty of Architecture

International Office Thákurova 9, 166 34 Prague 6, Czech Republic



Application for the State Examination

Design Practise and Management

NAME AND SURNAME: DATE OF BIRTH:				
I declare that I have fulfilled all the necessary conditions and successfully completed the following prescribed courses:				
Code	Course	Classification	Date	
500EM1	Economics and Management I	Classification	Date	
500EM2	Economics and Management II			
500EM2	Law			
500P 500MT5	Materials and Technology V			
In Prague		dent's signature		

After completing this form, submit it to the International office.