**BOSNA I HERCEGOVINA**

**FEDERACIJA BOSNE I HERCEGOVINE**

**BOSANSKO–PODRINJSKI KANTON GORAŽDE**

Naziv organizatora obrazovanja odraslih: ALDI „Napredni institut za tehnologije i inovacije“ Ustanova za obrazovanje odraslih Goražde

Sjedište organizatora obrazovanja odraslih: Ul. Panorama bb, 73000 Goražde

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| **PRIJAVA ZA UPIS**  **U PROGRAM OBRAZOVANJA ODRASLIH**  Prezime i ime polaznika/ce ............................................................................................................................  Prezime i ime roditelja......................................................................................................................................  Datum rođenja ......................................................................................................................................   |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |   (JMB)  Mjesto rođenja .................................................................................................................................................  Država rođenja ................................................................................................................................................  Državljanstvo .................................................................................................................................................  Radni status ....................................................................................................................................................  Adresa stanovanja polaznika/ce ..............................................:......................................................................... |

Naziv i vrsta programa obrazovanja odraslih Engleski jezik za poslovnu administraciju

Stečeno obrazovanje, škola, razred i stepen stručne spreme.....................................................................

Zanimanje i radno iskustvo.....................................................................................................................

Način finansiranja: finansira DVV International - Ured za BiH

Uz zahtjev prilažem sljedeće dokumente (naziv, broj, izdata od):

1. .........................................................................................................................................................................

2. .........................................................................................................................................................................

3. .........................................................................................................................................................................

4. .........................................................................................................................................................................

Datum podnošenja prijave PODNOSILAC PRIJAVE

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DATUM: ...........................

BROJ: ..............................

Na osnovu ...........................................................................................................................................................

(Svjedočanstvo/rješenje, razred, broj, datum i ustanova, na osnovu koga se polaznik/ca upisuje)

Polaznik/ca .................................................................................... je upisan/au program obrazovanja odraslih .............................................................................................................................................................................

U .................................., ................ 20..... godine UPIS ODOBRAVA DIREKTOR

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