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| **PRIJAVA**  **Master islamskih studija**  *Islam u Evropi* | ***APPLICATION FORM***  ***for MA in Islamic Studies***  *Islam in Europe* |

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| Kandidati su dužni dostaviti u potpunosti ispunjen upisni formular. Molimo da uz formular dostavite i ostalu potrebnu dokumentaciju. Univerzitet zadržava pravo povući, bez upozorenja, svaku aplikaciju koja nije upotpunjena do konkursom navedenog roka. | *Applicants are requested to submit a completed application form. Add all other required documents for a complete application. The Faculty reserves the right to withdraw, without notice, any application that is not completed by the deadline.* |

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| **LIČNI PODACI / *PERSONAL INFORMATION*** | | | | | | | | | | | | |
| Ime/ *First name*: | |  | | | Prezime/ *Last name* : | |  | | | Spol (označite sa +)/  *Gender (please put +)* | | |
| Srednje ime/ *Second name*: | |  | | | Državljanstvo/ *Citizenship*: | |  | | | Muško/ *Male* | | Žensko/  *Female* |
| Mjesto rođenja/ *Place of Birth*: | |  | | | Datum rođenja/ *Date of Birth*: | |  | | |  | |  |
| Ime oca/ *Father’s Name*: | |  | | | Ime majke/ *Mother's Name*: | |  | | | | | |
| Bračno stanje(označite sa +)/ *Marital Status(please put +)* | | | Neoženjen/Neudata / *Single* | | | Oženjen/Udata / *Married* | | | Ostalo/ *Other* | | | |
| Univerzitet na kojem stediplomirali i studijski program /  *University you graduated from and study field:* | | |  | | | | Godina diplomiranja /*Graduation year*: | |  | | | |
| **KONTAKT INFORMACIJE / *CONTACT INFORMATION*** | | | | | | | | | | | | |
| Kućna adresa / *Home Address*: | | | | | | Poštanska adresa (ukoliko je drugačija od kućne adrese)/  *Mailing Address (if different from home address)*: | | | | | | |
| Prijavljujem se za (označitesa +): / *I apply for* *(please put +):* | | | | | | | | | | | | |
| Redovan studij / *Full-time study format* | | | | | | Vanredan studij / *Part-time study format* | | | | | | |
| Telefon/  *Phone*: |  | | | Mobitel/*Mobile*: | |  | | *E-mail* : | | |  | |

Uz prijavu prilažem sljedeće dokumente / *With this application form, I attach the following documents:*

1. Original diplome / *Original diploma*
2. Dodatak diplomi/ Uvjerenje o prepisu ocjena / *Diploma supplement/Transcript*
3. Kopiju pasoša / *Passport copy*
4. Potvrdu o jezičkim kompetencijama / *Language certificate*
5. Motivaciono pismo / *Motivation letter*

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| **PRIZNAVANJE INOSTRANE DIPLOME (OBAVEZNI PODACI) / *DIPLOMA VALIDATION (REQUIRED INFORMATION)*** |
| Ukoliko ste prethodno obrazovanje završili van Bosne i Hercegovine, molimo Vas da pročitate i potpišete izjavu ispod (OBAVEZNO):  *If you haveobtained your previous higher education degree outside of Bosnia and Herzegovina, please read and sign the following statement (OBLIGATORY):*  **Izjava o priznavanju diplome / *Statement Regarding Diploma Equivalency***  Izjavljujem da sam svjestan/a pravne obaveze da uradim priznavanje/ekvivalenciju akademske kvalifikacije u Bosni i Hercegovini kao uslov za upis na drugi ciklus studija. Također, svjestan/a sam činjenice da ću biti uslovno upisan/a dok ne pribavim rješenje o nostrifikaciji/ekvivalenciji akademske kvalifikacije, da je Fakultet islamskih nauka izuzet bilo kakve obaveze u spomenutom procesu, te da u slučaju ne pribavljanja rješenja o priznavanje/ekvivalenciji u zakonom predviđenom roku (6 mjeseci od dana potpisivanja ove izjave) gubim status studenta na Fakultetu islamskih nauka.  *I certify that I am fully aware of my legal responsibility to obtain a Diploma recognition/equivalency on diploma equivalency in Bosnia and Herzegovina as a requirement for master studies. Hereby I also state that until I acquire the above-mentioned equivalency, I accept the status of a conditionally enrolled student, and exempt the Faculty of Islamic Studies of any liability for the equivalency process. I state that I am fully aware of the possibility of losing my acquired rights if I fail to timely acquire a positive diploma equivalency (according to the laws of Bosnia and Herzegovina) within 6 months from the day of making this statement.*  Potpis kandidata / *Signature of the candidate*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Izjava / *Statement***

Potvrđujem da su sve gore navedene informacije istinite i tačne. Ovom izjavom dajem ovlaštenje Fakultetu islamskih nauka u Sarajevu da kontaktira relevantne institucije i koristi moje lične podatke u vezi sa porijeklom, sadržajem i autentičnošću moje akademske kvalifikacije te dostavljene dopunske dokumentacije, ukoliko je to potrebno da bi se utvrdila vjerodostojnost mojih obrazovnih kompetencija. Ovim također ovlašćujem Fakultet islamskih nauka u Sarajevu da koristi i obrađuje moje lične podatke u okviru procedure upisa, postupka priznavanja inostrane visokoškolske kvalifikacije, postupka priznavanja i ekvivalencije predmeta položenih na drugim visokoškolskim ustanovama te i u okviru drugih postupaka definiranih odnosno zahtjevanih na osnovu važećih propisa u Bosni i Hercegovini ili općih akata Fakulteta islamskih nauka u Sarajevu. Ovo ovlaštenje se daje na neodređeni vremenski period.

*I certify that all information given on the application is true and correct. Hereby I give the authorization to the Faculty of Islamic Studies in Sarajevo to contact relevant authorities regarding the origin, content and authenticity of my academic qualifications and additional documentation submitted, if such a step is necessary to evaluate my educational credential(s). Hereby I authorize the Faculty of Islamic Studies Sarajevo to use and process all my personal data collected within the student enrollment procedure, foreign qualification recognition procedure, course transfer procedure and in all other related procedures defined or requested by the valid laws in Bosnia and Herzegovina or general acts of the Faculty of Islamic Studies, University of Sarajevo. This authorization is given for an unlimited period of time.*

Potpis kandidata / *Signature of the candidate*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **KANDIDAT / *APPLICANT*:** | | | | **APLIKACIJU PRIMIO/LA (za potrebe FIN-a)/ *APPLICATION RECEIVED BY (for FIS use)***: | | | |
| Potpis/ *Signature*: |  | Datum/ *Date* : |  | Ime i potpis/ *Name and signature*: |  | Datum/ *Date*: |  |