

Student Residence Office

To be completed by the Student
Residence Office

Application No.: _____

Date:

**Application for admission to subsidised accommodation for students with the
status of persons under international protection for the academic year
2017/2018**

**The selection of the higher education or secondary school student residence with
regard to the place of study**

Higher Education Centre (please circle): Ljubljana / Maribor / Koper

Type of student residence (please circle): public/secondary school

Higher education or secondary student residence (fill in the name):

.....

I. Applicant's basic data:

Applicant's name and surname:

Gender (please circle): M F Date of birth (day, month, year):

Citizenship:.....

PERSONAL IDENTIFICATION NO (EMŠO): |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|

Tax identification number: |_|_|_|_|_|_|_|_|

Address for service

Street and number:.....

Postal code: City or Town:

Contact telephone number:

Email address:.....

International protection status (please circle): YES NO

Number of the decision of the Ministry of the Interior:

II. Enrolment data for the academic year 2017/18:

(If you have only applied, please enter information on the study programme that you intend to enter.)

Higher education institution:.....

Study programme:.....

Place of study:.....

Study level/cycle (please circle): First cycle programme/Second cycle programme:
integrated master's programme/Second cycle programme: Master's degree
programme/Third cycle programme

Type of study (please circle): full-time/part-time

Type of enrolment (please circle): first-time enrolment/repeat enrolment

Year of study (please circle): 1 2 3 4 5 6

III. Specific circumstances of the applicant

Parenthood

I declare that my child will be staying with me during my studies (please circle): YES NO

I declare that I would like to live together with the child's other parent (please circle): YES NO

Person's with a disability

Student with a disability entitled to a companion (please circle): YES NO

IV. Data on the guarantor who will pay any debt arising from rent and other costs relating to the student's accommodation

Name and surname:.....

Gender (please circle): M F

Citizenship:Tax identification number: |_|_|_|_|_|_|_|_|

Address (street and number):.....

Postal code:.....	City or Town:
Contact telephone number:.....	
E-mail:.....	

V. Data on the authorised person if the student has not filled in the application by himself/herself

Name and surname:.....
Contact telephone number:.....
E-mail address:.....

VI. Declaration:

By my signature, I guarantee the veracity and completeness of all the information contained in this application, including the enclosures. I agree that the right to subsidised accommodation shall cease permanently if it is established that I have provided false information. I give my consent that the Student Residence Office shall verify all the information contained in the application with database administrators.

I undertake to forward any changes that affect my eligibility within 15 days of the occurrence of such change to the address of the Student Residence Office.

VII. Enclosures

The student shall enclose with his/her application the following mandatory supporting documents:

- proof of his/her status as a person under international protection;
- the power of attorney of the authorised person;
- proof of his/her child's status as a person under international protection if the student would like to live together with his/her child;
- a certificate from the competent authority that the disabled student at issue is entitled to a companion, if he/she would like to live with him/her.

For the procedure, the Student Residence Office will obtain the following on its own motion:

- data from the eVŠ records of students and graduates on the status of the student for the academic year 2017/2018.

Other (please fill in)

Place and date:

Applicant's signature:
