**ÓBUDA UNIVERSITY**

Doctoral School of Safety and Security Sciences (BDI)

 1081 Budapest, Népszínház u. 8.

**DECLARATION**

 Me, (name)………………………………………………….. (Neptun Number) ……………………… PhD student **DECLARE**, that I wsh to be in the status of

**A K T I V**  / **PA S I V**  student (underline the dorresponding answer)

in

………………………….. semester

***For the case of Pasiv status please fill the document*** *„Request for postponement of the semester” and send it to the BDI Office.*

I agree with the regulations given for the certain status. .

Date: ……………… year ………….. month ………. day

 (Sign of the student)