

**Student Affairs Office** 

## DECLARATION OF PREVIOUS FOREIGN LANGUAGE STUDY FOR THE REGISTRATION IN THE FIRST YEAR OF THE FOLLOW-UP MA PROGRAMME AT THE FACULTY OF ARTS, CHARLES UNIVERSITY

Name and surname:	
Date of birth:	
I declare that during my previous studies at I passed an  a) course credit	(please, state your previous university)
b) examination	
of the foreign language proficiency	
In Prague on	
in i rague on	signature