к Положению об академической мобильности студентов НИУ ВШЭ

*Attachment 1*

*to Regulations for Academic Mobility of HSE Students*

Ректору НИУ ВШЭ

Я.И. Кузьминову

*TO:*

*Y.I. Kuzminov*

*Rector*

*National Research University*

*Higher School of Economics*

от

студента

*FROM STUDENT:*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(фак-т) */ (faculty)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(образовательная программа) / (*study program*)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(курс и уровень обучения) */ (year and level)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(ФИО) / *(student’s full name)*

Заявление

*Request*

Прошу Вас направить меня на обучение по

*I hereby request to take part in*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(долгосрочная/краткосрочная программа обмена, программа двойных дипломов, исследовательская стажировка аспиранта)

(long-term/short-term exchange program, double degree program, research internship)

в \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(название университета, учебного заведения) / *( name of the educational institution)* (страна, город) / *(city, country)*

*в период с \_\_\_\_\_\_\_ по \_\_\_\_\_\_\_\_\_\_\_.*

*From to*

Источник финансирования: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

*Funding source:* (собственные средства / стипендия / другое) / (personal savings / scholarship /other)

Обязуюсь выполнять условия учебного плана. Учебный план прилагаю к заявлению.

*I undertake to comply with the curriculum enclosed here to.*

\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Дата *(Date)* Подпись *(Signature)* Расшифровка подписи / *(Printed name)*

Согласование декана получено:

*Approved by the Dean:*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(факультет) / *(faculty)*

­\_\_­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(подпись) / *(signature)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(ФИО) / *(full name)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(дата) */ (date)*