



Application for the State Examination

Design

NAME AND SURNAME:

DATE OF BIRTH:

I declare that I have fulfilled all the necessary conditions and successfully completed the following prescribed courses:

Code	Course	Classification	Date
500TD	Theory of Design		
500ND3	Teachings of Design III		
500I2	Interior II - History of Interior		
500DPM	Design Process Methodology		

In Prague

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Student's signature

After completing this form, submit it to the International office.