**To the Director of ....................................** (name of the academic unit / college) **of Tallinn University**

1. **APPLICATION**

Please include me as an external student at ............................................................................ (name of the school / college) on the study programme of .......................................................... for the ……………… Semester of Academic Year …………………, as I wish to defend my final thesis / take the final examination.

|  |
| --- |
| First name: |
| Family name: |
| Personal Identification code: |
| Address: |
| Telefoni nr: | E-mail address: |
| Last educational institution graduated from: |
| Graduation year: | Diploma no.: |
| I have previously studied at the following higher education institutions (name, years, field): |

|  |  |
| --- | --- |
| Code of the final thesis / final examination: | Volume (ECTS): |
| Title of the thesis in Estonian and in English: |
| Name of the supervisor of the thesis: |

Sincerely

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*Signature and date*