GOSPODARSKA ŠKOLA

 VARAŽDIN

VARAŽDIN, BOŽENE PLAZZERIANO 4

**ZAHTJEV ZA NASTAVAK OBRAZOVANJA**

|  |  |
| --- | --- |
| Ime i prezime učenika |  |
| Adresa stanovanja |  |
| Broj telefona/mobitela |  |
| E-mail adresa |  |
| Program koji je prethodno završen |  |
| Trajanje obrazovnog programa |  |
| Datum završetka prethodnog programa |  |

Želim nastaviti školovanje za zanimanje: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Zahtjevu prilažem:

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Datum predaje zahtjeva: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Potpis:

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