

**SCHOOL FOR TRAFFIC & TRANSPORT  
DORMITORY  
Preradoviceva 33, 2000 Maribor**

**APPLICATION FORM FOR ACCOMMODATION**

for academic year \_\_\_\_\_ or from \_\_\_\_\_ to \_\_\_\_\_

<b>1. First Name(s) and Surname of the Applicant:</b>		
2. Date of Birth: (day/month/year)	Place of Birth:	Country of birth:
3. Gender: F M	4. ID/Passport No:	5. Nationality:
6. Home Address: (street & No., postal/ZIP code, City, Country)		
7. Phone:	E-mail:	
8. Name and Address of faculty/school:		
Study programme:		Year of study:
<b>9. PARENTS OR LEGAL REPRESENTATIVES</b>		
a, First Name(s) and Surname:		
b, Home Address:		
C, Phone:	E-mail:	
a, First Name(s) and Surname:		
b, Home Address:		
C, Phone:	E-mail:	

Signature of the Applicant

Signature(s) of Legal Representative(s)

\_\_\_\_\_

\_\_\_\_\_

Maribor, \_\_\_\_\_

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**Receipt of Received Application**

Hereby we certify that the candidate Mr/Ms \_\_\_\_\_ handed in the  
(Name of Candidate)  
application on \_\_\_\_\_ .  
(Date)

Stamp

\_\_\_\_\_  
Signature of the Official