**Request for accommodation in Hradební Dorm for the upcoming academic year 2023/2024**

**Surname and Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Field of study / year of study: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(next academic year)**

**Address (incl. ZIP CODE): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Mobile phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Distance of your home address in km : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Faculty social scholarship holder (YES/NO)\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\****Filled by study dept.*

**Study dept. notes: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

* Social scholarship granted (faculty) ……………………………………12 points
* Distance of residence in CR 100 km or more from Prague ….……………………1 point
* Distance of residence in CR 200 km or more from Prague..……….................. 2 points
* Distance of residence in CR 300 km or more from Prague ……………………... 3 points
* Distance of residence in CR 400 km or more from Prague ……………………... 4 points
* Foreign Resident ……………………………………..…………………... 5 points
* Visa requirement ………………………………………………………….………… 5 points
* Excellent learning outcomes ……………………………………………………… 2 points
* Work for the benefit of the faculty (recommendation by the department) …………………………………………………………………………….…………....1 point

**Total points awarded** ……………………………………………………………………………………………………

***If my application is approved, I am aware that if I do not move in within five days of the determined day, the accommodationt will be assigned to the next person. I also declare that I will  comply with all the rules laid down by the Code of Conduct***

**Important!**

**We ask all the students who get the accommodation in the dormitory assigned to inform the Academic Affairs Office immediately if they decide not to use the accommodation between the time of application and the determined day of moving in to the dorm (the end of September / beginning of October)**

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**Date Signature of applicant**

**Approved request/ declined – date: ………………………….**

**Student was accepted as a substitute.**