

THE SLOVAK REPUBLIC

School:

Supplement to the School-Leaving Examination Certificate

(Only valid with the School-Leaving Examination Certificate)

First Name and Surname:

Date of Birth: Place of Birth:

Nationality: Citizenship: Birth Registration Number:

Field of Study (code and title):

SKKR/EQF level*): 4

Form and Length of Study: Academic Year:

Class: School - Leaving Examination Protocol No.:

Level of Education:

Details of the field of study

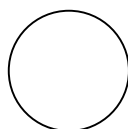
Suggested fields of further study

Course content

Subject - the number of lessons of each subject for the entire study - language:

In

on



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Headmaster