School:							
Schoo	I-Leav	/ing l	Exami	nation P			
First Name and Surname:							
Date of Birth:	P	Place of Birth:					
Nationality:	C	Citizenship:		Birth	Birth Registration Number:		
Field of Study (code and title):							
					SKKR/EQF	level*):	4
Form of Study:							
Class:			. School -	Leaving Exar	nination Proto	col No.:	
The student studied from				. and complet	ed his/her stu	dies in	
The student participated in the School-Leavir	ng Examir	nation on	·		1	for the	time
The student has participated in the School-I (the School Act) and to changes and ame Research and Sport of the Slovak	ndments	to the re	elevant A	cts as amende	ed, and the M	inistry of Educa	ation, Science
Eva	luation o	f the Sc	hool - Le	aving Examin	ation		
Subject	Level	External Part		Internal Part			
		%	Percentile	Written Form	Oral Form	Practical Part	Language of Examination
						-	
		Optio	onal Subj	ect			
The student**):					completed the	School-Leavin	ıq Examinatior
The Retake School-Leaving Examination w							
The entire School-Leaving Examination wa	-						
ŭ	•						
Headmaster				 Head of the S	chool - Leavin	a Evamination	 Committee

^{*)} Level of the Slovak Qualifications Framework / European Qualifications Framework.
**) successfully/unsuccessfully
306ang MŠVVaŠ SR / od 01. 10. 2022

The Protocol of the Scho	ol-Leaving Examinati	ion Certificate No.:							
Received on:	ived on:								
The copy of the School-Leaving Examination Certificate was issued on:									
Received on:		Signature) :						
Assessment classification	excellent	very good	good	satisfactory	unsatisfactory				
	1	2	3	4	5				