

Student Residence Office

To be completed by the Student  
Residence Office

Application No.: \_\_\_\_\_

Date: \_\_\_\_\_

**Application for admission to subsidised accommodation for students with the  
status of persons under international protection for the academic year  
2018/2019**

**The selection of the higher education or secondary school student residence with  
regard to the place of study**

Higher Education Centre (please circle): Ljubljana / Maribor / Koper

Type of student residence (please circle): public/secondary school

Higher education or secondary student residence (fill in the name): .....

.....

**I. Applicant's basic data:**

Applicant's name and surname: .....

Gender (please circle): M F Date of birth (day, month, year): .....

Citizenship:.....

PERSONAL IDENTIFICATION NO (EMŠO): |\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|\_|

Tax identification number: |\_|\_|\_|\_|\_|\_|\_|\_|\_|

**Address for service**

Street and number:.....

Postal code: ..... City or Town: .....

Contact telephone number: .....

Email address:.....

International protection status (please circle): YES NO

Number of the decision of the Ministry of the Interior: .....

**II. Enrolment data for the academic year 2018/19:**

*(If you have only applied, please enter information on the study programme that you intend to enter.)*

Higher education institution:.....

Study programme:.....

Place of study:.....

Study level/cycle (please circle): First cycle programme/Second cycle programme:  
integrated master's programme/Second cycle programme: Master's degree  
programme/Third cycle programme

Type of study (please circle): full-time/part-time

Type of enrolment (please circle): first-time enrolment/repeat enrolment

Year of study (please circle): 1 2 3 4 5 6

**III. Specific circumstances of the applicant**

**Parenthood**

I declare that my child will be staying with me during my studies (please circle): YES NO

I declare that I would like to live together with the child's other parent (please circle): YES NO

**Person's with a disability**

Student with a disability entitled to a companion (please circle): YES NO

**IV. Data on the guarantor who will pay any debt arising from rent and other costs relating to the student's accommodation**

Name and surname:.....

Gender (please circle): M F

Citizenship: .....Tax identification number: |\_|\_|\_|\_|\_|\_|\_|\_|

Address (street and number):.....

Postal code:..... City or Town: .....

Contact telephone number:.....

E-mail:.....

**V. Data on the authorised person if the student has not filled in the application by himself/herself**

Name and surname:.....

Contact telephone number:.....

E-mail address:.....

**VI. Declaration:**

By my signature, I guarantee the veracity and completeness of all the information contained in this application, including the enclosures. I agree that the right to subsidised accommodation shall cease permanently if it is established that I have provided false information. I give my consent that the Student Residence Office shall verify all the information contained in the application with database administrators.

I undertake to forward any changes that affect my eligibility within 15 days of the occurrence of such change to the address of the Student Residence Office.

**VII. Enclosures**

**The student shall enclose with his/her application the following mandatory supporting documents:**

- proof of his/her status as a person under international protection;
- the power of attorney of the authorised person;
- proof of his/her child's status as a person under international protection if the student would like to live together with his/her child;
- a certificate from the competent authority that the disabled student at issue is entitled to a companion, if he/she would like to live with him/her.

**For the procedure, the Student Residence Office will obtain the following on its own motion:**

- data from the eVŠ records of students and graduates on the status of the student for the academic year 2018/2019.

**Other** (please fill in)

Place and date:

Applicant's signature:

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