

ENROLMENT FORM

To be completed by the student. Fill out in UPPERCASE LETTERS or circle the appropriate answer.

1.	FIRST NAME		LAST NAME	
2.	JMBAG (from X card)			
3.	Academic year of enrolment:			2024/2025
4.	Name of degree program:			MEDICINE
5.	Type of degree program: Integrated undergraduate and graduate degree			6. Year of enrolment in the degree program:
				I. II. III. IV. V. VI.
7.	Enrolment indicator: 1. enrolling for the first time or earned 60 ECTS 2. earned 42-59 ECTS 3. earned less than 42 ECTS ("repeating" year) 4. transfer from another university			8. Student status: Full-time student PARTICIPATING IN THE COSTS OF STUDY
9.	Marital status: <input type="checkbox"/> single <input type="checkbox"/> married			10. Do you have health insurance: YES NO Insurance basis (e.g. parents):
11.	Living arrangements during study: 1. with parents 2. with relatives 3. apartment/house rental 4. student dormitory 5. in own or spouse's residence 6. other			12. Student's source of income during study: 1. parents 2. relatives 3. scholarship 4. bank loan 5. personal income 6. spouse 7. other
13.	Address while at university (including floor and landlord's surname):			Permanent residence address (in your city/country of origin):
14.	Contact telephone (mobile) while at university:			
15.	E-mail:			

I hereby give my consent for using my personal data for obtaining standard student rights, including library services. I give my consent that my e-mail address which is stored in the AAI@Edu.hr system can be used as the contact for various research projects as well as for obtaining student rights.

Completed forms and the submitted documents serve as the basis for electronic data processing for achieving the rights of enrolled students during their studies based on their full time student status in the Republic of Croatia. By signing the enrolment form, I give my consent to the University of Split School of Medicine to collect and process my data only for the above stated purposes.

In Split, _____ 2024	Student's signature
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ADMINISTRATIVE USE ONLY

Student gained less than 42 ECTS in previous academic year	Yes	Number of ECTS gained in the previous academic year	Subsequent enrolments:
	No		
Examinations/Courses not passed in the previous academic year:			
1.	5.		
2.	6.		
3.	7.		
4.	8.		
			Enrolment date: 2024

STUDENT COURSE REGISTRATION (please circle)	YEAR 4						
	ISVU Code	Code	Course leader	Course	Teaching Hours	L + S + P*	ECTS Credits
YES-NO	132281	MFE406	Assoc. Prof. Varja Đogaš	Psychological Medicine II	30	10+10+10	2
YES-NO	201347	MFE410	Assist. Prof. Antoanela Čarija	Dermatovenerology	80	30+15+35	5
YES-NO	132241	MFE401	Assoc. Prof. Sanja Lovrić Kojundžić	Radiology	70	18+8+44	4
YES-NO	132284	MFE409	Assoc. Prof. Boran Uglešić	Psychiatry	105	30+20+55	7
YES-NO	132282	MFE407	Assoc. Prof. Ivica Bilić	Neurology	90	20+25+45	7
YES-NO	132242	MFE402	Assist. Prof. Ana Barić Žižić	Nuclear Medicine	40	12+14+14	2
YES-NO	132286	MFE411	Prof. Darko Duplančić	Medical Humanities IV - Medical Ethics III	15	2+13+0	1
YES-NO	132278	MFE403	Prof. Darko Duplančić	Internal Medicine	360	72+72+216	20
YES-NO	132283	MFE408	Prof. Krešimir Rotim	Neurosurgery	15	4+6+5	1
YES-NO	132280	MFE405	Prof. Marija Tonkić	Clinical Microbiology and Parasitology	30	12+18+0	2
YES-NO	132279	MFE404	Prof. Boris Lukšić	Infectology	95	20+26+49	5
YES-NO		MFMI ..		Elective course:	25	5+15+5	2
YES-NO		MFMI ..		Elective course:	25	5+15+5	2
	TOTAL hours: *Lectures + Seminars + Practicals				980		60

Date:

Approved by:

Associate Professor Joško Božić
Vice Dean for Medical Studies in English

Tina Komar, MSc. Econ.
Head of the Student office