 ROMÂNIA

MINISTERUL APĂRĂRII NAȚIONALE

ACADEMIA NAVALĂ „MIRCEA CEL BĂTRÂN”

Str. Fulgerului, Nr. 1

Cod 900218 Tel./Fax (0040) 0241.643.096

Nr. din

CONSTANȚA

# REQUEST

# for the recognition in the „Mircea cel Bătrân” Naval Academy of didactic functions in university education obtained abroad

1. Applicant`s last name ....................................................................................................................

2. Other previously held surnames ....................................................................................................

3. All applicant`s first names ............................................................................................................

4. Date of birth: day .............. month ......................................................... year .................................

5. Mailing adress :

Street ........................................................................... , Nr. ........... , Block ............ , Staircase ,

Apt. ............ , Town ..................................................................... , Postal code ,

County………………………………………….., Country ................................................................

6. Telephone nr. ........................................ , E-mail adress ,

**please recognize my didactic function of** , obtained at:

1. Name of the abroad accredited education institution in which this teaching function was obtained: ..............................................................................................................

9. The country to which the nominated institution belongs: ..............................................................................

1. The scientific field in which the applicant exercises the duties related to this teaching function…. ...,

|  |  |
| --- | --- |
|  | this being registered in the supporting document |
|  | not being registered in the supporting document nor in other documents presented by me |
|  | not being registered in the supporting document, but being specified in the following document that I present issued by the institution............................................................... |

**(mark only one of the 3 cases)**

11. The reason (purpose) for the recognition request: ..................................................................................

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12. I declare on my own responsibility and under the Penal Code that:

1. I have not applied so far the recognition of this didactic function at the specialized institution of the Ministry of Education;
2. the information presented by me in this application is real and authentic;
3. I assume responsibility for the authenticity of the documents presented by me for the recognition file.

Date Applicant`s signature