

Student Dormitory Office

To be completed by the Student
Dormitory Office

Application No.: _____

**Application for admission and extension of subsidised accommodation of
students with the status of a person with temporary protection for the
2024/2025 study year**

Selection of student dormitory depending on the place of study

Higher education centre (encircle): Ljubljana / Maribor / Koper

Type of dormitory (encircle): public / secondary school

University or secondary school student dormitory (enter
name):.....

I.

Basic information about the applicant:

Name and surname of the

applicant:.....

Gender (encircle): M F Date of birth (day, month, year):

Citizenship:

Personal identification number: |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|

Tax number: |_|_|_|_|_|_|_|_|_|_|

Address for service

Street and house number:.....

Postal code: Place of post

office:.....

Contact telephone number: E-mail address:

.....

Number of decision of the competent administrative unit:.....

II.

Information about enrolment for the 2024/2025 study year:

(If you have just applied, enter the information about the study programme in which you intend to enrol.)

Vocational college / Higher education institution:.....

Study programme:.....

Place of study:.....

Level of study (encircle): Higher vocational college / First cycle / Second cycle: integrated master's study programme / Second cycle: master's study programme / Third cycle

Mode of study (encircle): full-time / part-time

Type of enrolment (encircle): First enrolment in the year / Repeat year

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

III.

Special circumstances of the applicant

Parenthood

I state that I will have a child in my custody during my studies(encircle): YES NO

I state that I want to live with the other parent (encircle): YES NO

Person with a disability

Student with a disability entitled to an assistant (encircle): YES NO

IV.

Information about the guarantor for the payment of debt related to rent and other possible costs related to the student's accommodation

Name and surname:.....

Gender (encircle): M F

Citizenship:Tax number: I _ _ _ _ _ _ _ _

Address (street, number):

Postal code:.....Place of post office:

Contact telephone number:.....E-mail address:.....

V.

Information about the authorised person if the student did not complete the application themselves

Name and surname:.....

Contact telephone number:..... E-mail
address:.....

VI.

Statement

I guarantee with my signature that all information provided in the application, including the appendices, is accurate and complete. I agree that my right to subsidised accommodation is permanently terminated if it is established that I have provided false information. I authorise the Student Dormitory Office to verify all the information provided in the application with the database managers.

I undertake to communicate any changes affecting eligibility within 15 days of the change to the address of the Student Dormitory Office.

VII.

Appendices

Mandatory proof that the student must enclose with the application:

- Proof of status of a person with temporary protection for the student.
- Authorisation from the authorised person.
- Proof of the status of a person with temporary protection for their child if the student wishes to live with their child.
- Certificate from the competent authority that the student with a disability is entitled to an assistant if they want to live with the assistant.

For the procedure, the Student Dormitory Office will itself obtain:

- Information from the record of students and graduates on student status.

Other (enter)

Place and date:

Signature of the applicant:
