

Application for specific recognition of former education into degree from the Faculty of Medicine and Dentistry

(Version 3.0: 10.06.2014)

Name (surname/first name):	Social security number:
Semester address:	Phone number:
Postal code and postal area	E-mail address:
	lin.
 Information on current studies at U I have been accepted to the following str 	udyprogramme at the Faculty of Medicine and Dentistry:
☐ Bachelor's programme	
□ Master's programme	
☐ Programme of professional study	
3. The education I am requesting spec	cific recognition for is completed at:
☐ University of Bergen	
☐ Other university or university college i	n Norway
Name of institution	
☐ Other university or university college of	outside of Norway
Name of institution	

4. Information about the education I am requesting recognized specifically and which courses at UiB I am requesting exemption from.

Former education:				
Course code:	Course name:			
ECTS/	Level (BA, MA):	Attachment		
credits/points:		no.:		
	sting exemption from:			
Course code:	Course name:			
Former education:				
Course code:	Course name:			
ECTS/	Level (BA, MA):	Attachment		
credits/points:		no.:		
	sting exemption from:			
Course code:	Course name:			
Former education:				
Course code:	Course name:			
ECTS/	Level (BA, MA):	Attachment		
credits/points:	Level (DA, WA).	no.:		
creates, points.				
Courses I am requesting exemption from:				
Course code:	Course name:			
Former education:				
Course code:	Course name:			
ECTS/	Level (BA, MA):	Attachment		
credits/points:		no.:		
Courses I am requesting exemption from:				
Course code:	Course name:			

5. Attachments

□ Certified copies of diplomas/transcripts of records

- → The original documents must be presented at the Information centre at Faculty of Medicine and Dentistry before you can apply for specific recognition. The Information centre will assist you in certifying your copies.
- → Diplomas/transcripts must be in English or a Scandinavian language, and issued at the place of study.
- → Diplomas/transcripts must include a description of the weighting system (i.e. how many credits/ECTS make up a full time study) in addition to a description of the grading system.
- → Exception: Diplomas/transcripts from UiB do not have to be presented or attached.

□ Detailed course descriptions and reading lists

- → You may take a printout from the university's website or a copy from a programme or study catalogue.
- → The course description must document the content and level of the education (bachelor, master, Ph.D.).
- → Course descriptions and reading lists must be in English or a Scandinavian language.

6. Comments/further information					
If you have further information which might be relevant for the application, you may enclose					
If you have further information which might be relevant for the application, you may enclose additional documents.					
7. Place, date and signature					
Place:	Date:	Signature:			

8. Handing in the application

You may hand in the application at the Information centre at the Faculty of Medicine and Dentistry, send it at an attachment to info@mofa.uib.no or mail it to:

Det medisinsk- odontologiske fakultet Universitetet i Bergen Postboks 7804 5020 Bergen NORWAY

Please note that the application is not complete until original diplomas/transcripts are presented at the Information centre at the faculty of Medicine and Dentistry.