

**APPLICATION FOR PERMISSION TO STUDY TWO UNIVERSITY MASTER'S DEGREE COURSES
SIMULTANEOUSLY**

APPLICANT

P E R S O N A L D E T A I L S	DNI / Passport / NIE :	
	Surname(s) and first name(s):	
	Address for correspondence	
	Avenue, Street, Road, Square:	No.:
	Post Code:	Town:
	Province:	Country:
	Telephone Number:	E-mail address:

INFORMATION REGARDING THE APPLICATION

<p>Having been admitted to the University Master's Degree course in:</p> <p>for the academic year 20__ / __ , at the University of</p> <p>The applicant requests permission to combine his/her studies on the course cited above with a University Master's Degree course in:</p>
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The applicant **REQUESTS** permission to combine studies on his/her University Master's Degree course in _____
 given at the University of _____
 with studies on the University Master's Degree course in _____
 given at the University of _____
 in the academic year 20__ / __

In _____ , on the _____ of _____ , 20__