



**USER REGISTRATION FORM FOR FOREIGN STUDENTS AT UNIVERSITY OF LJUBLJANA
LIBRARIES OF BIOTECHNICAL FACULTY**

Personal data:	
First name and surname	
Date of birth	
Home address (street and house number)	
City, postal code, country of permanent residence	
Address of temporary residence (street and house number)	
City, postal code of temporary residence in the Republic of Slovenia	
Phone number	
E-mail address	
Other data:	
University of Ljubljana,	Biotechnical faculty
Study program:
Scientific area:

Registration number **User Card No./Student Card No.:** _____

Statement:

I, the undersigned, state that I want to become member of the libraries of Biotechnical Faculty. I am acquainted with, accept and will respect such provisions as determined in the rules of the general conditions of service and operations in UL libraries, and the rules in libraries of Biotechnical Faculty.

Date:

Signature: