F A M U
FILMOVÁ A TELEVIZNÍ FAKULTA AKADEMIE MÚZICKÝCH UMĚNÍ V PRAZE

APPLICATION FOR MODIFIED STUDY TERMS BASED ON STUDENT'S SPECIFIC NEEDS

Name and surname…….. Date of birth…..……

Email ……Telephone……

Study program / field……Year of study……..……..

I request the study modification based on my specific needs resulting from:

☐ Physical/visual/hearing impairment
☐ Chronic somatic disease
☐ Learning disorder or ADHD
☐ Autism spectrum disorder
☐ Psychological disorders
☐ Communication ability impairment
☐ Other lasting disabilities……:……

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I am attaching the following documents to the application:

☐ **proof of disability** under Section 67 of Act No. 435/2004 on employment,

☐ **proof of disability of any grade** under Section 39 of Act No. 155/1995 on pension insurance,

☐ **identity card of a person with disability of any degree** under Section 34 of Act No. 329/2011 on the provision of subsidies to people with disabilities,

☐ **proof of specific learning disorder** identified on the basis of the results obtained by means of a generally accepted diagnosis of specific learning disorders

☐ **proof of an autism spectrum disorder** identified on the basis of a comprehensive examination by a clinical psychologist

☐ **medical report** on the results of a specialist medical examination for persons who are unable to submit documents specified above in clauses a) to e).

☐ **other:** ……

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The student's proposal to modify the study according to his/her specific needs (or on a separate sheet):

Date:……. Applicant's signature:…….

In accordance with the relevant legal regulations, the AMU informs that the personal data of the data subject will be processed with the Rector's decree No. 5/2018, Protection and processing of personal data, dated 25/05/2018.

Comments and the proposal from the Head of Department or the Guarantor of Study Program (or on a separate sheet):

In ……date…… ……

Signature of the Head of Department
or the Guarantor of Study Program

Comments and the recommendation of the Vice-Dean for Study Affairs (or on a separate sheet):

In ……date…… ……

Signature of the Vice-Dean for Study Affairs