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Registry number:

Subject: Request for the exemption from afternoon classes

## **REQUEST**

I .....(parent's name) as a parent of  
.....(name of child) in class ..... apply for a permission  
of the Headmistress of Budapest

IX. Kerületi Körösi Csoma Sándor Bilingual School tol et my child leave the school before 4  
p.m,earlier than the end of common study time.

Place of Birth of student:

Time of Birth of student:

Mother's name:

Date: Budapest, .....

.....  
Student

.....  
Parent