**APPLICATION FOR THE CANCELLATION OF THE RECOGNITION/VALIDATION PROCEDURE**

I request from the Agency for Vocational Education and Training and Adult Education to cancel the process of recognition/validation of foreign educational qualification acquired in the completed secondary education vocational/post-secondary non-tertiary program.

**INFORMATION ABOUT APPLICANT**

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| --- | --- |
| First and last name (and birth name) |       |
| Personal identification number |  |
| Please deliver the cancellation decision/opinion and original documents to the following address |       |
| E-mail |       |
| Telephone |       |
| Cell phone |       |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| In       |  |      2024. |  |  |
| (city) |  | (date) |  | (applicant's signature or signature of the legal representative) |