To the President of

the Independent Agency for Quality Assurance in Education (IQAA),

Sh. Kalanova

 Research Institute requests to accept the application on carrying out institutional

(Name of the educational organization)

accreditation and sends all necessary information:

|  |  |  |
| --- | --- | --- |
| 1 | Name of the educational organization |  |
| 2 | Registered address |  |
| 3 | Full name of the head of the organization |  |
| 4 | Data on the state license to conduct educational activities |  |
| 5 | The number and list of study programmes of postgraduate education submitted by the educational organization by levels of education (Residency, Master, and PhD programmes) inaccordance with the appendix to the license\* |  |
| 6 | Bank account details | Taxpayer Registration Number Individual Identification Code Bank Identification Code Business Identification Number Bank detailsBeneficiary Code - Phone/fax: |
| 7 | The overall number of students, including those studying on thestate educational grant |  |
| 8 | Name and information of thecontact person, phone and e-mail |  |
| 9 | Full name of the accountant,phone and e-mail |  |

\* *submit scanned copies of the organization's constituent documents, licenses, and certificates of previous institutional accreditation.*

The head of the organization

(signature) (Full name)

Stamp

*Note: the application shall be documented on the official letterhead of the organization.*