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***-IAFAA-***

**PRIJAVA**

**ZA UPIS U PROGRAM**

**SERTIFIKOVANI FORENZIČKI REVIZOR**

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(ime i prezime)

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(adresa: ulica, grad i država)

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(kontakt telefon)

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(e-mail adresa)

Ovim dostavljam svoju prijavu za pripremu i proveru znanja za stručno -profesionalno zvanje

SERTIFIKOVAN FORENZIČKI REVIZOR

Plaćanje će biti:

 lično

 preko firme\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Ime firme, adresa i PIB

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 (mesto i datum) (svojeručni potpis)

**Čitko popunjenu i skeniranu prijavu dostaviti na:** **office@iafaa.net**