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|  | | **Aanvraag van een premie voor de inschrijving in een centrum voor volwassenenonderwijs** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 1F3D8D-3833-130927  Beschrijving: leeuwformulieren | | | | | | | | | | | | |
|  | | Agentschap Hoger Onderwijs, Volwassenenonderwijs en Studietoelagen  **Afdeling Volwassenenonderwijs – 7A**  Koning Albert II-laan 15, 1210 Brussel  Tel. 02 553 98 32 – Fax 02 553 98 20  Website: [www.ond.vlaanderen.be/volwassenenonderwijs](http://www.ond.vlaanderen.be/volwassenenonderwijs) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | In te vullen door de  behandelende afdeling  ontvangstdatum | | | | | | | | | | | | |
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|  | | *Waarvoor dient dit formulier?* *Met dit formulier vraagt een cursist die een diploma in een centrum voor volwassenenonderwijs behaald heeft, de terug­betaling van zijn inschrijvingsgeld.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **1** | | **Vul uw persoonlijke gegevens in.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | voor- en achternaam | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | straat en nummer | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | postnummer en gemeente | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | rijksregisternummer | | |  |  | | |  | | |  | | | |  | |  |  |  | |  | |  | |  |  | |  | | |  | | | | | | | | | | | | | | | |
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| **2** | | **Vul de gegevens in van de titularis van de rekening.**  *De titularis van de bankrekening is de persoon van wie de naam op de bankkaart staat.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | voor- en achternaam | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | straat en nummer | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | postnummer en gemeente | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | rijksregisternummer | | |  |  | | |  | | |  | | | |  | |  |  |  | |  | |  | |  |  | |  | | |  | | | | | | | | | | | | | | | |
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| **3** | | **Vul de gegevens in van de opleiding die u gevolgd hebt.**  *Bij ‘bedrag opleidingscheques’ vult u in welk bedrag van het inschrijvingsgeld u met opleidingscheques hebt betaald.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | naam | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | bedrag opleidingscheques | | |  | | | | | | | | | | euro | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | startdatum | | | dag | | | | | |  | | |  | | | maand | | | |  | |  | | jaar | | |  | |  | | |  | |  | |  | | | | | | | | | | |
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| **4** | | **Voeg bij dit formulier de bewijsstukken die in de onderstaande aankruislijst staan en vink ze telkens aan in de aankruislijst.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | de inschrijvingsfiches, ondertekend door het centrum, waarop vermeld staat hoeveel inschrijvingsgeld u in totaal voor deze opleiding betaald hebt (opleidingscheques inbegrepen) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | een kopie van uw diploma | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **5** | | **Vul de onderstaande verklaring in.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | **Ik bevestig dat alle gegevens in dit formulier naar waarheid zijn ingevuld.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | datum | | dag | | | |  | |  | | | maand | | | | | | |  | |  | | jaar | | | |  | |  | | |  | |  | |  | | | | | | | | | | |
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|  | | handtekening | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |