# UNIVERSITY OF ZAGREB SCHOOL OF MEDICINE

# **APPLICATION FEE**

Beneficiary: Medicinski Fakultet Zagreb - Medical Studies in English Šalata 3, 10000 Zagreb OIB 45001686598 <u>Purpose:</u> Application fee for Medical Studies in English The amount: 200,00 EUR - do not send check

### **TUITION FEE:**

<u>Beneficiary:</u> Medicinski Fakultet Zagreb Šalata 3, 10000 Zagreb OIB 45001686598 <u>Purpose:</u> Tuition fee for the Medical Studies in English

#### For payments made from abroad:

BANK NAME: PRIVREDNA BANKA ZAGREB BRANCH ADDRESS: Račkoga 6 CITY: Zagreb POST CODE: 10000 SWIFT / BIC CODE: PBZGHR2X IBAN CODE: HR32 2340 0091 3102 9776 9 Details of charge: OUR (all expenses are covered by the applicant)

#### For payments made in Croatia

PRIVREDNA BANKA ZAGREB, Franje Račkog 6, 10 000 Zagreb Account No: HR84 2340009 – 1110024619 Poziv na broj 5100

Payments are made in HRK according to the HNB (Hrvatska narodna banka) middle exchange rate on the date of payment

#### IMPORTANT NOTE!!!

When you make payments, please make sure that you provide **your last name**, beneficiary and purpose of payment.