

**REQUIRED DOCUMENTS FOR APPLICATION TO THE SECOND CYCLE OF STUDIES
“MASTER OF SCIENCE”, “PROFESSIONAL MASTER”, “JOINT MASTER”**

FIRST STUDY PROGRAM

**TERRITORIES, DISABILITIES, ORPHAN STATUS, ROMA AND EGYPTIAN
COMMUNITY**

ACADEMIC YEAR 2025 – 2026

APPLICATION AND REGISTRATION PROCEDURES FOR CANDIDATES FROM
THE REPUBLIC OF KOSOVO, CANDIDATES OF ALBANIAN ORIGIN FROM
NORTH MACEDONIA, MONTENEGRO, PRESEVO, MEDVEGJA, AND BUJANOVAC,
CANDIDATES WITH DISABILITY STATUS, ORPHAN STATUS,
AS WELL AS CANDIDATES FROM THE ROMA AND EGYPTIAN COMMUNITIES,
IN FULL-TIME SECOND CYCLE STUDY PROGRAMS AT HIGHER EDUCATION
INSTITUTIONS

CHAPTER V

Candidates from the **Republic of Kosovo, of Albanian origin from North Macedonia, Montenegro, Presevo, Medvegja, and Bujanovac**, candidates with disability status, orphan status, **as well as candidates from the Roma and Egyptian communities.**

Candidates from the Republic of Kosovo, of Albanian origin from North Macedonia, Montenegro, Presevo, Medvegja, and Bujanovac, candidates with disability status, orphan status, as well as candidates from the Roma and Egyptian communities, at the moment of application present themselves or the person authorized by them. They must submit the following documentation at the time of application:

- a) Candidates from the Republic of Kosovo, of Albanian origin from North Macedonia, Montenegro, Presevo, Bujanovac, and Medvegja must submit:
 1. The application form according to the format in Annex no. 2 of this instruction;
 2. The declaration according to appendix no. 1 attached to this instruction;
 3. A copy of the document issued by the Educational Services Center certifying that the secondary education diploma is recognized, accompanied by a photocopy of the diploma/certificate and grade transcript; Candidates who have not completed the process of recognition and equivalence must submit proof that they have applied to the QSHA (Quality Assurance Agency) for recognition and equivalence of their diploma.
 4. Copies certified as true to the original in the Republic of Albania and translated into Albanian (if issued in a foreign language) of the State High School Diploma along with the transcript of records, or the diploma/certificate of the secondary school obtained in the respective country, together with the transcript of records, legalized by the local or central governing authorities of the country where the studies were completed;
 5. Identification document (ID card or passport). Only a photocopy of the identification document is kept in the file;
 6. Two photographs;
 7. Copy of the payment receipt

Application Form

I, the undersigned _____, born on _____
(first name father's name last name)
with identity card/passport no. _____
e-mail: _____ Tel: _____

I request to enroll in the first cycle / professional / integrated second cycle study

- ☐ Of professional nature
- ☐ "Bachelor"
- ☐ Integrated second cycle ("Master of Science")
- ☐ "Professional master"
- ☐ "Master of Science", "Master of Arts"
- ☐ "Executive Master"

1. I declare that I am applying under quotas for candidates

a) with Albanian nationality from the territories (mark with "x" the place where the candidate comes from):

- ☐ Republic of Kosovo;
- ☐ Montenegro;
- ☐ North Macedonia;
- ☐ Presheva;
- ☐ Bujanovac;
- ☐ Medvegja;

b) foreign

With citizenship _____

Mother tongue _____

With secondary education _____

Current address _____

2. I hereby declare that I am applying for the quota for the candidates (the category to which the candidate is part of shall be marked with an X):

- ☐ Person with limited abilities (PAK)
- ☐ Orphan
- ☐ Roma minority
- ☐ Egyptian minority

3. I authorize the above-mentioned higher education institution and the Education Services Center to process my personal data within the framework of the application and enrollment for continuing university studies at the above institution, as well as to publish them.

4. I declare that I will enroll only in one of the study programs for which I will be declared a winner for the next academic year.

5. I declare that I am not currently enrolled in any other study program at other higher education institutions, and that I will not simultaneously attend another study program until I complete the study program for which I am applying.

6. I declare that I am familiar with the relevant guidelines and that I understand the procedures of application, selection, and enrollment.

7. I declare the authenticity of the data and documents submitted. I am aware that, in case of false data declaration or submission of forged or untrue documents, I am subject to the measures provided for in the Penal Code and other legal and sub-legal acts in force. In case of doubt about the authenticity of the declared information, the Center for Education Services and/or the higher education institution will initiate the verification procedure by forwarding these data also to competent authorities if necessary.

Candidate's First Name	Father's Name	Last Name
		Signature

Statement

I, the undersigned _____, born on _____ with ID/passport no. _____

1. Authorize the institution of higher education _____ the Ministry of Education Sports and Youth, as well as the Center for Educational Services to handle my personal data in the framework of the application and registration for the continuation of higher education studies in the aforementioned Institution, as well as their eventual publication.

I also authorize the Higher Education Institution where I applied, the ministry responsible for education and the institution responsible for providing educational services to carry out all verifications and receive all information related to: higher education studies, where I applied for registration, the period of studies completed before, and any other type of verification related to the above.

2. I declare that I am not studying in any other study program in other institutions of higher education, and that I will not simultaneously follow another study program, until the end of the study program I am applying for.

3. I declare that I am familiar with this instruction and that I meet the criteria set forth in it to apply for a transfer of studies / second study program.

4. I declare the truth of the data and documents presented. I am aware that in case of declaration of untrue data or submission of forged documents or with untrue data, I am subject to the measures provided for in the Criminal Code and other legal and by-laws in force. In case of doubt about the truth of the declared information, Ministry of Education Sports and Youth, as well as the Center for Educational Services and/or the HEI initiate the procedure of their control and eventually forward this data to the competent authorities.

First name Father's name Surname of the candidate

First name Father's Nme of the academic secretariat staff

Signature

Signature

Location: _____ Date: ____ . ____ . 2025

* Candidates with **the status of a person with disabilities, orphan status, as well as candidates from the Roma and Egyptian communities** must submit:

- 1 - The application form according to the format in Annex no. 2 of this instruction.
- 2 - A copy of the diploma/certificate, accompanied by the transcript of grades.
- 3 - At the moment of registration, the successful candidate must submit to the Higher Education Institution (HEI) the declaration according to Annex no. 5 of this instruction, as well as a copy certified as a true copy of the original of the State Matura diploma together with the grade certificate, or a certificate/diploma of other studies obtained abroad. A candidate who completed secondary school in the Republic of Albania before 2011 must submit a certified copy of the secondary school leaving certificate.

In the absence of the State Matura diploma or the secondary school leaving certificate, the candidate must submit, respectively, a State Matura grade verification issued by the Education Services Center, and a duplicate of the school leaving certificate issued by the secondary school and verified by the respective Regional or Subregional Education Directorate, or the high school transcript issued by the State Archives.

- 4 - A photocopy of the identification document (ID card, identity paper, or passport);
- 5 - Two personal photographs;
- 6 - A copy of the payment slip.

Candidates with the status of persons with disabilities, in addition to the documentation specified in point 8 of this chapter, must also submit a **copy certified as true to the original** of the decision from the **Medical Commission for Determining Work Capacity (KMCAP)** or a copy certified as true to the original of the **relevant booklet** issued by the State Social Service;

d) Candidates with **orphan status**, in addition to the documentation required in point 8 of this chapter, must also submit a copy of the **document certifying orphan status** issued by the State Social Services.

e) **Roma and Egyptian candidates**, in addition to the documentation required in point 8 of this chapter, must also submit a **self-declaration** or a **document certifying that they are Roma or Balkan Egyptian**.

Application Form

I, the undersigned _____, born on _____
(first name father's name last name)
with identity card/passport no. _____
e-mail: _____ Tel: _____

I wish to be registered in the second cycle program of study:

- ☐ Of professional nature
- ☐ "Bachelor"
- ☐ Integrated second cycle ("Master of Science")
- ☐ "Professional master" with
- ☐ "Master of Science", "Master of Arts",
- ☐ "Executive Master"

_____ at the HEI _____

I hereby declare that I am applying for the quota for candidates (to be marked with an "x" where the candidate comes from):

1. I declare that I am applying for the quota for candidates:

a) Albanian citizen within the country

b) Of Albanian citizenship from territories (mark an "x" the country the candidate comes from):

☐ Republic of Kosovo;

☐ Montenegro;

☐ Presevo;

☐ Bujanovac;

☐ Medveja;

c) with a foreign diploma

Citizenship _____

Native language _____

Secondary education _____

Current address _____

I hereby declare that I am applying for the quota for the candidates (the category to which the candidate is part of shall be marked with an X):

☐ Person with limited abilities (PAK)

☐ Orphan

☐ Roma minority

☐ Egyptian minority

2. I authorize the above-mentioned higher education institution and the Education Services Center to process my personal data within the framework of the application and enrollment for continuing university studies at the above institution, as well as to publish them.

3. I declare that I will enroll only in one of the study programs for which I will be declared a winner for the next academic year.

4. I declare that I am not currently enrolled in any other study program at other higher education institutions, and that I will not simultaneously attend another study program until I complete the study program for which I am applying.

5. I declare that I am familiar with the relevant guidelines and that I understand the procedures of application, selection, and enrollment.

6. I declare the authenticity of the data and documents submitted. I am aware that, in case of false data declaration or submission of forged or untrue documents, I am subject to the measures provided for in the Penal Code and other legal and sub-legal acts in force. In case of doubt about the authenticity of the declared information, the Center for Education Services and/or the HEI will initiate the verification procedure by forwarding these data also to competent authorities if necessary.

Candidate's First Name	Father's Name	Last Name
		Signature

Statement

I, the undersigned _____, born on _____ with ID/passport no. _____

1. Authorize the institution of higher education _____ the Ministry of Education Sports and Youth, as well as the Center for Educational Services to handle my personal data in the framework of the application and registration for the continuation of higher education studies in the aforementioned Institution, as well as their eventual publication.

I also authorize the Higher Education Institution where I applied, the ministry responsible for education and the institution responsible for providing educational services to carry out all verifications and receive all information related to: higher education studies, where I applied for registration, the period of studies completed before, and any other type of verification related to the above.

2. I declare that I am not studying in any other study program in other institutions of higher education, and that I will not simultaneously follow another study program, until the end of the study program I am applying for.

3. I declare that I am familiar with this instruction and that I meet the criteria set forth in it to apply for a transfer of studies / second study program.

4. I declare the truth of the data and documents presented. I am aware that in case of declaration of untrue data or submission of forged documents or with untrue data, I am subject to the measures provided for in the Criminal Code and other legal and by-laws in force. In case of doubt about the truth of the declared information, Ministry of Education Sports and Youth, as well as the Center for Educational Services and/or the HEI initiate the procedure of their control and eventually forward this data to the competent authorities.

First name Father's name Surname of the candidate

First name Father's Nme of the academic secretariat staff

Signature

Signature

Location: _____ Date: ____ . ____ . 2025