

Faculty of Law of Vilnius University
Master's Degree Study Programme "International and European Union Law"
____ Year, Full-time studies

Name, surname _____
Student Certificate No. _____
Tel. No. _____
Email _____

Dean of the Faculty of Law of Vilnius University

APPLICATION
Regarding the renewal of the studies

(date)
Vilnius

I hereby request to be allowed to continue my studies in the Master's degree study programme "International and European Union Law" at the Faculty of Law, full-time study form, ____ year, Russian/English group, State-funded/non-State-funded place, as of ____ 20__.

Academic differences: none no more than 15 credits

Outstanding financial obligations to VU: none

(name, surname, signature)