_	(name, surname, personal identification r	number)
	(address)	
	(phone number, e-mail)	
To the Rector of the Lithuanian	University of Health Sciences	
	REQUEST	
	(date) Kaunas	
Regarding the Renewal of Stu	idies, Admission to a Higher Study Y	/ear
Please allow me	to renew my studies and enrol at the F	aculty of
in the	study programme for the	year in an unfunded place. I wa
crossed out from the	faculty,	study programme, year
(provide a date)	·	
ATTACHED:		
	(student's signature)	(student's name, surname)
MEDIATE:		
Faculty Dean		