,	DLYAI UNIVERSITY OF EUROPEAN STUDIES	
No		Approved, DEAN,

I, the undersigned	· · · · · · · · · · · · · · · · · · ·	, student
in the academic year 20 / 20, ye study	ear of study, Bachelor level/Master level	, programme of
type of enrollment full-time /dist exam session for the following	rance learning request to participate in	the liquidation
	, ,	credits:
	,,	credits:
	,,	credits:
-	,,	credits:
-	,,	credits:
•	of credits of the disciplines for which I request to part 0 credits.	icipate in the
liquidation session does not exceed 20		•
liquidation session does not exceed 20	O credits.	•
liquidation session does not exceed 20 Date	O credits.	•
liquidation session does not exceed 20 Date Confirmed,	O credits. Signature	•
liquidation session does not exceed 20 Date	O credits. Signature	•