## **STATEMENT**

The undersigned	, student of
the Faculty of European Studies in the academic year 20.	
Master level , programme of study type of enrollment full-time  distance learning	
type of enrollment full-time distance learning	g hereby declare that I have lost /
other situations	
my student card \( \square\) transportation card \( \square\).	
Contact information:	
e-mail:	
telephone no.:	
address:	
Mentions:	
Date	Signature