

BABEŞ-BOLYAI UNIVERSITY
FACULTY OF EUROPEAN STUDIES

No. ____/____

Approved,
DEAN,

Dear Dean,

I, the undersigned _____, student in
the academic year 20__/20__, year of study____ Bachelor level / Master level ,
programme of study _____,
type of enrollment **full-time** / **distance learning** , request your approval for the
following:

Date _____

Signature _____

To the Dean of the Faculty of European Studies