BABES-BOLYAI UNIVERSITY FACULTY OF EUROPEAN STUDIES Approved, DEAN, Dear Dean, I, the undersigned , student of the Faculty of European Studies, year of study ____, Bachelor's level, **programme of study** International Relations and European Studies in Romanian, type of enrollment FULL-TIME, academic year 20 /20, request to be transferred to the programme of study International Relations and European Studies, type of enrollment Distance lerning, year of study , starting with the academic year 20_ / 20, for the following I agree to fulfill the requirements relating to tuition fee changes (according to the tuition fee Regulation of Babes-Bolyai University). I request the transfer for the following reasons: Signature To the Dean of the Faculty of European Studies Academic situation of student matriculation no Year academic year average grade* Year academic year average grade* Year academic year average grade* Year_____academic year____average grade*_____ Year academic year average grade* Year academic year average grade* Year academic year average grade* The duration of studies is years.

Registrar,

We certify the accuracy of the information above.