No/	
	Approved, DEAN,
Dear Dean,	
I, the undersigned	, student of
the Faculty of European Studies, Bachelor level/M	laster level , programme of study
, type of enrolls	ment full-time / distance learning,
subsidized places, non-subsidized places, with schola	
state scholarship holder*, request to withdraw from studies.	
Mentions:	
Date	Signature
To the Dean of the Faculty of Eur	opean Studies
Academic situation of student	matriculation no
Academic situation of student	
• Year / academic year 20 -20 /	
 Year/ academic year 2020/	
 Year/ academic year 2020// Year/ academic year 2020// 	

^{*}Students of Romanian ethnicity

^{**} Depending on the time of registration of the withdrawal request, the proportion of the tuition fee due is established as follows:

⁻If the withdrawal request is registered during the first semester, 50% of the total tuition fee will be due;

⁻If the withdrawal request is registered during the second semester, the full tuition fee will be due.