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Received on:

Request form for academic affairs

From:

To: Dr. Csaba Berkovits, Head of the Academic Board of the Faculty of Dentistry

Date: Szeged, (day) (month), 2016

ETR username:SZE.....

E-mail address:@.....

I am a student in the basic/pre-clinical/clinical module (please underline) at the Faculty of Dentistry in the first semester of the academic year 2016/2017. I hereby request that my tuition fees be reduced to 20% of the regular tuition amount.

Reason: I am only taking a course or courses that do(es) not involve class attendance.

Yours sincerely,

.....

Student's signature

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FOGORVOSTUDOMÁNYI KAR

WHEN YOU WRITE A REQUEST, PLEASE FOLLOW THE GUIDELINES BELOW.

From: *your name*

To: * Prof. habil. Gyula Szabó M.D., Ph.D., D.Sc.
Program Director

or

* Associate Professor Kinga Turzó Ph.D.
Dean of the Faculty of Dentistry

or

* Dr. Csaba Berkovits
Head of the Academic Board of the Faculty of Dentistry

Date: *today's date*

Dear Professor,

- **State your problem**
- *Be short and to the point*
- **State your request**
- *Attach supporting documentation (if necessary–i.e., you mention something in your request requiring proof)*

Yours sincerely,

your signature

