

A.i. Rector
of Danylo Halytsky Lviv National
Medical University
Orest CHERMERS
Student (...) course, group № ...
of Faculty of Foreign Students
Speciality *Medicine*, (*Dentistry* or
Pharmacy)
Surname and name
(name of country)

APPLICATION

Please, give me a duplicate of my student card, because I lost
my previous.

Date

Signature