

APPLICATION FOR AMENDMENT

_____ Date

PERSONAL INFORMATION (Fill in with capital letters):

Full Name _____

Faculty and study year _____

CONTACT INFORMATION (Fill in with capital letters):

Home address _____

Personal phone number _____

Personal e-mail address _____

Emergency contact _____

Family members phone number _____

Car registration number _____

MARK AMENDMENT TYPE:

Relocation

Please let me relocate from dormitory No. _____ room No. _____ to dormitory No. _____ room No. _____
from _____

(Date)

Change of accommodation coefficient

Please, let me reserve _____ additional place in dormitory No. _____ room No. _____ to dormitory No. _____ room No. _____
_____ from _____

(Date)

Contract extension

- removed from students list when unfinished studies
- graduated student
- temporarily suspended studies

Please, let me extend accommodation contract in dormitory No. _____ room No. _____
from _____ till _____

(Date)

(Date)

I tend to continue studies from _____

(Resident's signature)

PILDO BENDRABUČIŲ GRUPĖS KOORDINATORIUS

Pažymėti:

Turi pateikti apmokėjimo kvitą sumai _____ / Mokesčiai sumokėti

Užsakytos papildomos paslaugos _____ / NĖRA

Turi galiojančių nuobaudų _____ / Galiojančių nuobaudų neturi

PASTABOS: _____

TVIRTINU:

Pareigos, vardas, pavardė, data, parašas