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| **APPLICATION** | **To: RSU,** |
| *Name of the department this application is addressed to* |
|  |
| *Name, surname of the person you are addressing this application to* |

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| **STUDENT INFORMATION** |
| **Name, Surname:** |  |
| **Student card No.:** |  | **Study programme:** |  |
| **Study year:** |  | **Semester:** |  | **Group:**  |  |
| **E-mail:** | ***@rsu.edu.lv*** | **Phone No.:** |  |
| **Address:** |  |

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| **CONTENT OF YOUR APPLICATION** |
| *Describe your application as much in detail as possible, stating your request at the end.* |
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| **Attached:** |       |

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| **Signature** |  |  | **Date** |  |

When completed, this form should be submitted to Student Services in RSU Main building, 16 Dzirciema Street, Block K, Room 100.

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| ***Received at RSU Student Services*** |  | ***For office use only:*** |
|  | **Date received** |  |
| **Signature** |  |
| **Decision** |  |