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**(NAME AND SURNAME)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(ADDRESS)**

To the Rector of Vilnius University

**APPLICATION FORM**

*day-month-year*

Please accept my application for admission to regular / extended (*please* *mark the appropriate*) doctoral studies in the field of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at Vilnius University.

Theme: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

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(Signature)