



2014–2020 metų
Europos Sąjungos
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REGISTRATION FOR STUDENT INTERNSHIP AT VYTAUTAS MAGNUS UNIVERSITY

The Baltic Studies Centre that the student represents:

Information about the applicant:

Surname:

Name:

Date of birth (year, month, day):

Citizenship:

Sex:

Identity number / Passport number:

Current level and year of studies:

Lithuanian language proficiency level:

Email:

Phone:

The form was completed by

(Name of the Head of the Centre):

Name, Surname, Signature

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“Lithuanian Academic Scheme for International Cooperation in Baltic Studies”
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