



2014–2020 metų
Europos Sąjungos
fondų investicijų
veiksmų programa



REGISTRATION FORM

LITHUANIAN LANGUAGE SUMMER COURSE

Note: The form is to be completed by the head of the centre.

Information about the student applying for the winter course:

Surname:

Name:

Date of birth (year, month, day):

Citizenship:

Sex:

Phone:

Email:

The Baltic Studies Centre that the student represents:

Study cycle:

Lithuanian language proficiency level:

A1 A2

B1 B2

C1 C2

Where a student would like to study:

A) VU

B) VMU

What is the student accommodation preference?

A Dormitory

B Will find accommodation off campus on his/her own

Specific preferences:

Rating number where a student would like to study (provided when several students intend to arrive from the centre irrespective of the desired study destination)

The form was completed by:

Name, Surname

Signature

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