		To: Rector of the V	olgSMU
		Vladimir V. Shkari	n
		From:	
			Full name
		The citizen of	
		Firm-intermediary	Country
		E-mail	
	Application		
Here	reby requesting your permission for	or training at:	
0	Pre-Medical Course		
0	1 course, Faculty of General Medicine (English Medium)		
0	1 course, Faculty of General Medicine (Russian Medium)		
0	1 course, Faculty of Stomatology (English Medium)		
0	1 course, Faculty of Stomatology (Russian Medium)		
0	1 course, Faculty of Pharmacy (English Medium)		
0	1 course, Faculty of Pharmacy ((Russian Medium)	
(plea	ase, make the point)		
of the Volg	gograd State Medical University for	or academic year of 20	021-2022 on the compensatory
basis and a	ask you to make the Invitation Le	etter for entry into Ru	ussian Federation for me fron
September	1, 2021.		
The University does not guarantee any seat in the university hostels.			
I ha	ave no citizenship of the Russian F	Sederation.	
I ag	I agree to process my personal data according to the order determined by the Federal La		
of 27th July	y 2006 №152 "About personal dat	ta".	
Date	e	Signatu	re