

To Chancellor of Federal State Government-Funded
Educational Institution of Higher Education
Volgograd State Medical University

Vladimir Shkarin

from _____
(FULL NAME)

Date of birth _____

Nationality _____

Passport No _____

Course _____ Group number _____

Phone number _____

Email _____

Intermediary Agency: _____

Application.

Please permit to issue me an invitation letter.

Attachment:

1. Application form for the invitation.
2. Passport copy.
3. Copy of the last Russian visa (YES/NO).

Signature:

Date: