**Request for granting the dean’s leave**

Wrocław, on

Student’s name:

Student’s number:

Residence address:

Contact (telephone number, e-mail address):

Field of study:

Year of study:

Studies: first/second cycle, full-time/part-time

**Mr / Ms**

**Deputy Dean of the Faculty of Languages, Literatures and Cultures of the University of Wrocław**

I hereby request you to grant me a dean’s leave for the semester

of the academic year

My request is justified by the following facts:

At the same time, I declare that I have passed the previous, i.e.

semester of study.

I attach the following documents:

Yours sincerely,

*(handwritten signature)*

Opinion and signature of the relevant institute/chair deputy head: