



		Warsaw,date
Name and surname		
Index number		
Field of study		
Studies cycle and year		
		dr Dominika Gadowska-dos Santos Vice-Dean for Student Affairs WNE UW
F	REQUEST FO	OR A REFUND
I hereby request for a refund of the amount:		The reason of the refund is the
following:		
I kindly ask you to transfer the mor	ney to the follov	ving (my personal) bank account [*] :
Name of beneficiary		
Address of beneficiary		
Amount		
Account number in IBAN format		
SWIFT code		
Country of the bank		
Decision:		Student's signature
		Signature
* The account number should be the provided, please indicate below the re		e used to make the payment. If a different number is unt number change.