**TITU MAIORESCU UNIVERSITY**

**FACULTY OF MEDICINE**

**Mrs Dean,**

Undersigned \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ student in the \_\_\_\_\_ year of study 2020 – 2021 academic year, to the **Medicine Faculty**, Medicine in English language Programme of study, please approve the equivalence of the following subjects studied at the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ University, Faculty of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_:

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| **No** | **Subject** | **Grade** | **The approval teacher's signature** |
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 Respectfully,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (signature)

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_