



UNIVERSITATEA DE MEDICINĂ ȘI FARMACIE
GRIGORE T. POPA IAȘI

Str. Universității nr.16, 700115, Iași, România
www.umfiasi.ro

APPLICATION*

Name:

First name:

birth datepassport, series..... nocountry:

email:,

please accept my application for sustaining the test in order to obtain the language proficiency certificate, language, which is necessary to enroll for the admission competition based on the evaluation of the candidates' academic and personal achievements, in the academic year 2020-2021, at the *Grigore T.Popa* University of Medicine and Pharmacy, Iasi, Faculty of.....

I opt for the exam organized on:

☐ 29 May 2020

☐ 22 June 2020

☐ 10 July 2020

Date:

Signature,

* To be completed in capital letters



RECTORAT

+40 232 211 818 tel / +40 232 211 820 fax
rectorat@umfiasi.ro