

DECLARATION OF NON-POSSESSION OF UNIVERSITY BOOKS

The undersigned _____,

born in _____ on _____

City _____

Country. _____

address _____ C.A.P/zip. _____

Student id nr A90_/ _____, enrolled at _____ year of the Course of

Magister Degree in Medicine and Surgery in English in order to be able to apply to:

Final Degree Exam admission for the month _____ year _____

DECLARES,

pursuant to current legislation, under its own responsibility, to be NOT in possession of any volume belonging to the University Library.

Place and date _____

Signature _____