Opole, *(fill in!)*

|  |  |
| --- | --- |
| Forename and surname: | *(fill in!)* |
| Student registration number: | *(fill in!)* |
| Year and field of study: | *(fill in!)* |
| Telephone number: | *(fill in!)* |
| E-mail address: | *(fill in!)* |

**Dean’s office**

**Faculty of Political Science and Social Communication**

**University of Opole**

**Declaration of loss of an electronic student identity card**

I hereby declare that my electronic student card has been:\*

– destroyed

– lost

– stolen

I am asking for duplicate the electronic student identity card.

If the card is found, I undertake to return the duplicate electronic student card immediately to the Dean's Office of the Faculty of Political Science and Social Communication of the University of Opole.

………..……………….

student's legible signature

\*Delete as appropriate