	(First name and Last name)
•••••	(Town/ City, Phone number)
To Di	rector Gintautas Rudzinskas
	nius Lithuanians' House
01 111	APPLICATION
	20
	Vilnius
Please	e accept my son / daughter, born
	(First name and last name)
	into this school into theclass.
	f birth (Y/ M/D)
Son /	daughter studied at
	(The Title of the School)
and co	ompleted class.
	ADDED:
	1.A copy of the passport of the Republic of Lithuania.
	2. A copy of Foreign passport or a copy of a temporary / permanent residence in the Republic of Lithuania.
	3. The pupil's birth certificate.
	4. A copy of exit education certificate.
	5. Certificate of student's health (vaccine-page).
	6. 4 pictures.
	7. Other

Signature

First name and Last name