

.....
Student name

Katowice,
date

.....
address

.....
Phone number

.....
Year of study

Marek Waluga, MD, PhD
Vice-Dean of the School of Medicine in Katowice
Medical University of Silesia in Katowice
18 Medyków Street
40-752 Katowice

Dear Dean,

I would like to officially request copies of the updated transcript of grades.

I hereby inform that the above document is supposed to be submitted at

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and for the following purpose:

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Sincerely yours,

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Student signature