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|  | Politechnika WrocławskaWydział Informatyki i Telekomunikacji |  |

Wrocław, ………..………....

|  |  |
| --- | --- |
| Name and surname : | ………………………………………………………………. |
| Student number: | ………………………………………………………………. |
| Field of study: | ………………………………………………………………. |
| Specialty: | ………………………………………………………………. |
| Degree level (year, semester): | ………………………………………………………………. |
| Full time studies  |

**Dear Sir,**

# Dariusz Król, DSc, PhD, Eng., Assoc. Prof.

# ****Vice-Dean for General Affairs****

**Faculty of Information**

**and Communication Technology**

**Subject: Refund of overpayment**

I kindly request a refund of the overpayment occurring on my student account no/general WUST:

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in the amount of PLN ................................................. and transfer it to my bank account number:

..........................................................................................................................................................

The overpayment resulted from …………………….……………………………………………………………………… ………………………………………………………………………………………………….………………….………………………..

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(legible signature)