



Sveučilište u Rijeci • Fakultet dentalne medicine University of Rijeka • Faculty of Dental Medicine

Krešimirova 40/42 • 51000 Rijeka • CROATIA Phone: + 385 51 559 200; 559 201, 559 202

Application form for the Dean's Award, academic year 2022/2023

First and Last Name:	
JMBAG:	
Address of residence:	
Phone number:	
E-mail:	
Academic year of study enrollment:	-
Year of study:Valuation year:	
List of associations/organizations/faculty and/or university booparticipated:	dies in which the student
List of attached documents:	
I hereby declare that the data provided in this application are tr documents are authentic: YES	ue and that all the attached
Signature:	
Place and date of application:	