**(NAME AND SURNAME)**

**DOCTORAL STUDENT OF (NAME OF FACULTY / CENTER) OF VILNIUS UNIVERSITY**

To the Rector of Vilnius University

**REQUEST FOR SURNAME CHANGE**

day-month-year

Vilnius

Please change my surname in the documents of my personal file from (*please indicate your old surname*) to (*please indicate your new surname*).

I have attached the copy of the marriage certificate (copy of the identity document, etc.).

(Signature) (Name and Surname)