Letter of Acceptance

| This is to acknowledge the acceptant | ce of | |
|---|------------------|--------------------------------------|
| (name of student) | (DOB) | (citizenship) for |
| weeks of practical work at the institution | on/unit indicate | d below. This placement forms a par |
| of the curricular requirement for the | DVM qualifica | tion at the University of Veterinary |
| Medicine, Budapest, Hungary. | | |
| I declare that at least 70% of | | • |
| fulfilled at the institution/unit detailed b | pelow, and I wil | l be supervising the practical work. |
| | | |
| Name of the institution/unit: Postal address: | | |
| Website/e-mail: | | |
| Name of supervising veterinarian: | | |
| Phone and e-mail of supervising vetering | arian: | |
| | | |
| | | |
| Date: | _ | |
| Signature of supervising veterinarian | | |