

## ESKAERAK

Izena eta abizenak \_\_\_\_\_ NAN \_\_\_\_\_

Helbidea \_\_\_\_\_ Herria \_\_\_\_\_

Posta Kod. \_\_\_\_\_ Tfnoa: \_\_\_\_\_ Posta elektronikoa: \_\_\_\_\_

Gradua: \_\_\_\_\_ Ikastaroa: \_\_\_\_\_ Irakasgunea: \_\_\_\_\_

**ONDOKOA ADIERAZTEN DU:**

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**ESKATZEN DU:**

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Leioan, 20 ..... (e)ko ..... aren ..... an

Interesatuaren sinadura

**MEDIKUNTZA ETA ERIZAITZA FAKULTATEKO DEKANO JAUNA**

✂ \_\_\_\_\_

Izena eta abizenak: \_\_\_\_\_ NAN: \_\_\_\_\_

Gradua: \_\_\_\_\_ Ikastaroa: \_\_\_\_\_ Irakasgunea: \_\_\_\_\_

Arazoa:

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Leioan, 20 ..... (e)ko ..... aren ..... an