



## LETTER OF AUTHORIZATION

to be filled in by the International Applicant/student who uses the services of a third party (family member, friend, agent, educational consultant, etc.) when requesting a refund at the Faculty of Humanities of ELTE. Failure to complete this document will prevent the Department of International Affairs from processing the reimbursement request.

I, the undersigned  
Applicant's personal data:

Family name	
Given name(s)	
Place and date of birth	
Passport number:	
Mother's birth name	
Address	
City, country, postal code	
e-mail	
Phone number	

being fully aware of my legal liability, hereby solemnly authorize  
Authorized person's data:

Family name	
Given name(s)	
Place and date of birth	
Passport number:	
Mother's birth name	
Address	
City, country, postal code	
e-mail	
Phone number	

to act on my behalf in all matters necessary with respect to my request for a tuition refund at the Faculty of Humanities of ELTE from the date of issue of this Letter of Authorization, until the request has been processed, i.e. honoured or denied. Any and all acts carried out by the person authorized on my behalf – including the signing of official documents – shall have the same effect as acts of my own.

Date (city/year/month/day):

**Applicant's signature**

**I agree to the authorization:**

Date (city/year/month/day):

**Authorized person's signature**

**Witness 1:**

name:

address:

ID/passport number.:

signature:

**Witness 2:**

name:

address:

ID/passport number.:

signature