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| **Surname:** |
| **Name:** |

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| Name of University: |
| University Degree: |
| Enrollment date: | Completion date: |
| Final Grade Point Average (indicating the highest possible mark, e.g. 105/110): |
| Legal Duration of the Course: |

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| Name of University: |
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| Name of University: |
| University Degree: |
| Enrollment date: | Completion date: |
| Final Grade Point Average (indicating the highest possible mark, e.g. 105/110): |
| Legal Duration of the Course: |

I, the undersigned, certify to my best knowledge that I have earned the above university degree(s) from the aforementioned institutions and with the final marks as indicated.

# Date:

**Name: Signature:**