

Declaration COVID-19

We certify that

Miss / Mr.

born in on / /

resident in

registered at the university

.....,

course of study

.....,

during the academic year 2019/2020, due to the restrictive measures introduced to deal with the health emergency caused by COVID-19

☐ has not been able to take the following examinations provided for in his study plan:

➤

➤

➤

➤

or

☐ was unable to discuss the final dissertation on the scheduled date and consequently did not complete her/his course of study by the academic year 2019/2020.

or

☐

.....

.....

Location and date

Stamp and signature of the university

.....