

Departmental coordinator's signature:

PROOF OF RECOGNITION

The <u>original document</u> stays with the examination board until the approval of the grades. The copy of the document stays with the student and is <u>required</u> to be handed in upon the formal recognition of credit.

	ECTS - EUROPEAN C	REDIT TRAN	SFER AND A	ACCUMULATION SYSTEM	
	Name of Student:				
	Matriculation number: Field of Study, Semester (during the exchange period):				
	Exchange Period: □sum	ımer term □ v	winter term 2	0	
	Today's date:				
Receiving	ı Institution:			Country:	
Sending Institution			Receiving Institution		
Code	Unit Title	ECTS	Code	Unit Title	ECTS
TOTAL ECTS			TOTAL E	CTS	
necessar	y continue the list on a sep	arate sheet.			
	that the above course units, or gnized. The credits will be tra			pleted at the partner institution,	will
SENDING	INSTITUTION:				
Date, Plac	ce:				
Name of s	signatory:				

University seal