

Anlage 3
Bitte nach Beendigung des Aufenthalts
ausgefüllt und unterschrieben an
das International Office der RUB,
z.Hd. Frau Odenbach,
D-44780 Bochum

EXCHANGE PROGRAM

Confirmation

This is to certify that _____ student at the
(name of student)

Ruhr-Universität Bochum, Germany,

born _____ is/was studying at

(name of host institution)

as an exchange student from _____ to _____. (Please indicate exact date)
(dd/mm/yy) (dd/mm/yy)

Date:

Signature:

Title/position of signatory:

Stamp of host institution:

Please note that this certification should be filled out at the end of the student's stay abroad – no more than 5 days before the end of the scholarship period!
