|  |  |  |
| --- | --- | --- |
| Place, Date**NamePosition:University of origin:**Email address:Phone number: |  |  |
|  |

To FICEM Partners,

I hereby certify that [Student name and surname] is currently enrolled in [University of origin] in [Name of the current program].

The student has been pre-selected by [Name of the University] to apply to [Name of the FICEM host University/Institution] for the Master of Science “[Name of the program]” in the frame of the FICEM consortium.

Yours sincerely,

[Name]

[Signature]