

Exchange Students

Transcript of Records/Certificate of Completion of Exchange Period for Students of Justus Liebig University Giessen

This is to certify that

from Justus Liebig University Giessen (D GIESSEN01) has successfully completed a period
of study as an exchange student at

for the period from _____ to _____

with the following results (please indicate module title/grade/ECTS credits):

To be signed by the respective representative of the **host institution**:

Name: _____

Job Title: _____

Signature: _____

Date: _____

Stamp:

An original copy of this document should be sent by the host institution to:

Justus Liebig University Giessen
International Office
Goethestr. 58
35390 Giessen
Germany
Fax: ++49 641 99 12139