



Trier University Participation Certificate

I, the undersigned, hereby confirm that the student:

..... (last name, first name)

..... (student identification number)

Stayed at Trier University and ...:

attended the lecture: (please indicate course title)

participated in the seminar, conference, summer school or other event:

..... (please indicate event title)

Semester:

Winter:

Summer:

THE FOLLOWING RESULT HAS BEEN ACHIEVED:

ECTS credits:..... Grade:

- Examination according to the subject of study examination regulations
(Fach-)wissenschaftliches Profilbildungsmodul
- Portfolio or oral exam (20-30 minutes)
Projektmodul

Date:

Signature:.....

Seal / Stamp:

Lecturer

Last name, first name:

Capacity / Function:

Faculty / Department