*(Academy Logo)*

**CERTIFICATE OF ATTENDANCE**

**It is hereby confirmed that the applicant:**

|  |  |  |
| --- | --- | --- |
| Full name: |  | |
| ID Number (for Cypriot Citizens): |  | |
| Passport number (for non-Cypriot Citizens): |  | |
| Passport Country of Issue: |  | |
| Passport Expiration Date: |  | |
| Academy: |  | |
| Title of Degree/Diploma: |  | |
| Year of Study: |  | |
| Duration of Studies (years/ semesters): |  | |
| Teaching Language: | Greek/English (delete as appropriate) | |
| Implementation method: | Physical Presence | |
| Duration of required on-board  Practical Training: |  | |
|  | | |
| ………………………………………….  **Signature and Stamp** | | ……………………………………………….  **Title of Signatory** | |
| ……………………………………………  **Name of Signatory** | | ………………………………………………  **Place and Date** | |