



**UNITED NATIONS
UNIVERSITY**

UNU-INWEH

**Institute for Water,
Environment and Health**

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Proof of Enrollment or Graduation

This is to certify that _____,
(Last Name) (First Name)
born on (Day/Month/Year) ____ / ____ / _____

TO BE COMPLETED FOR ENROLLED STUDENTS

is currently enrolled as a student in (degree type & name)

_____ at the University / School (Name of Institution)

The above mentioned degree programme is a Bachelor's/Masters/Ph.D. (please circle) or equivalent (please specify)_____.

The student will return to resume his/her studies at the above mentioned University after the internship. His/her predicted graduation date is (Day/Month/Year) ____ / ____ / _____

TO BE COMPLETED FOR GRADUATES

Has graduated from the University / School (Name of Institution)

_____ with the following degree: (degree type & name)

_____ His/her graduation date was (Day/Month/Year) ____ / ____ / _____

TO BE COMPLETED FOR ALL CANDIDATES (To Be Filled Out By School)

Hereby I, (Last name, First name) _____,
(Title/Designation) _____ confirm the
correctness of the above given information.

Address of University/ School: _____

Contact phone number: _____

Contact email: _____

Email of the student: _____

Signature / Stamp Date

(Day/Month/Year)