



Date \_\_\_\_\_

To whom it may concern,

This is to certify that according to our records/proof presented to us:

<b>Last name/ Surname</b>	
<b>First name(s)</b>	
<b>Date of birth</b>	
<b>Current address</b>	

This certification is being issued upon his/her request.

Stamp (optional)

<b>Signature</b>	
<b>Position</b>	
<b>Contact e-mail</b>	
<b>Company/ university</b>	

