

CERTIFICATE OF ENROLLMENT

Name of the school where you are currently enrolled:

University of Fountain

Department of: Foreign Studies

Name of Student: Smith, John

(Last Name) (First Name) (Middle Name)

Date of Birth: 2003.3.25

(Year) (Month) (Day)

Enrollment Period at the home university or school

2021.9.1

to

2025.6.30

(Year) (Month) (Day)

(Year) (Month) (Day)

This certification is issued by the request of The University of Shiga Prefecture for application purposes for exchange student.

Name of the Administration Office's Head in PRINT

Williams, Robert

Signature: (Williams, Robert)

Date: 2023.10.20

* We need this document to confirm the period you are to be enrolled at your home university. Because you can be an exchange student while you are a student of home university.