|  |
| --- |
| **Certificate of Completion of a Foreign Language Course at Warsaw School of Economics (SGH)**  **I.** ......................................................................................... ..........................  *(first name and last name – in block letters) Student ID number*  **II.** Date and Place of Birth: ...................................................................................  **III**. Type and Mode of Studies (regarding the Certificate): .............................................  **IV.** Language: .......................... (I or II) Lecturer/Examiner: ........................................  **V.** Date of Taking the Exam *(Month and Year)*: ................................ Grade: ................  **VI.** Contact Information *(Phone Number / E-mail Address)*:  ..................................................................................... |