



**ATTESTATION
CONCERNING ACTIVE PARTICIPATION IN THE SCIENTIFIC COMMUNITY OF THE
UNIVERSITY OF SZCZECIN**

I: STUDENT'S PERSONAL DATA

Surname and name: _____ Album no

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Department: _____

Major: _____

Profile: _____ Year of study _____

Studies: full-time studies part-time studies I° II° single master's degree

Correspondence address: _____

II: STATEMENT OF BENEFITS IN THE ACADEMIC YEAR 2023/2024

It is declared that the student
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actively participated in the academic year **2022/2023** in the activities of the Scientific Circle of the University of Szczecin

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..... (name of the Scientific Circle)

Specification of the tasks in which the student actively participated during the academic year **2022/2023**:

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Place, date

date, signature and stamp of the Research Circle Supervisor

III. ATTESTATION - MEMBER OF STAFF OF THE UNIVERSITY WHO PROVIDES ADMINISTRATIVE SUPPORT FOR RESEARCH CIRCLES (after the supervisor of the research circle issues the certificate, please send it to one of the following email addresses: zyta.jedrzejczak@usz.edu.pl / karolina.gibka@usz.edu.pl)

NOTES:

date, signature and stamp of employee

IV. TO BE COMPLETED BY THE EMPLOYEE

NOTES:

date of declaration, signature and stamp of employee