

UNIVERSITY CERTIFICATE

(PROGRAM INFORMATION AND LOCATION OF STUDIES)

The following should be completed and signed by the Head of the Department or the Director of the program or the Registrar or any other university authority. This information is of great importance for the Hellenic N.A.R.I.C (DOATAP) to reach a decision whether the degree under evaluation complies with the provisions of Greek Legislation.

NAME OF THE UNIVERSITY: Neapolis University Paphos

STUDENT'S SURNAME: Dimitrakopoulou

STUDENT'S FIRST NAME: Vasiliki

STUDENT'S ID NUMBER: 1183803163

FACULTY / SCHOOL / DEPARTMENT: School of Economics,
Administration and Computer Science

DEGREE AWARDED: Postgraduate

NOMINAL DURATION / CREDITS OF STUDY PROGRAM FOLLOWED:

... 3 Semester... // ... 90 ECTS...

TRANSFERRED CREDITS, if any: NONE

... (name of Institution) ... // ... (number of transferred credits) ...

➤ **Percentage of academic staff holding a doctorate title (Ph.D., Doctor of..., etc.) in the study program followed:** 100 %

LOCATION OF STUDIES (*)

I confirm that (name of student) ... 's studies, from (date of commencement) ... to ... (date of completion), took place and were completed at (name of the university, campus) ... in (city) in (country) and at no other campus.

..... (date)....

.... (signature)....

.... (full name and title of signer)

(*) Not applicable for distance learning study programs.