LOCATION OF STUDIES (\*) /BΕΒΑΙΩΣΗ ΤΟΠΟΥ ΣΠΟΥΔΩΝ

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 university title of signer) ….*

(\*) Not applicable for distance learning study programs / Δεν ισχύει για προγράμματα εξ’αποστάσεως

**Σε περίπτωση προγραμμάτων εξ αποστάσεως, το Πανεπιστήμιο πρέπει να βεβαιώσει τα παρακάτω: / In the case of a distance learning program the university must verify the following:**

Program Title: (*fill in the title awarded*) ……………………

I confirm that ……………... (name of student) ……’s mode of studies was distance learning (e-learning, on-line) and no part of the study program including group meetings/sessions and exams, took place in Greece.

*….. (date)….*

*…. (signature)….*

*…. (full name and university title of signer) ….*