



Performance certificate - Proof of the acquisition of credit points -

Faculty 6 - 12 (incl. Teaching profession)

Faculty 1 - 5

To
University of Bremen
Central Examination Office

Box 33 04 40
28334 Bremen

Student information

Student ID no. _____

Surname _____

First name _____

Phone no. _____

Degree

Bachelor's
degree

Master's
degree

Master of Education

State examination
Law

Study format

degree program

Details of performance / final examination

Title (german)

Title (english - please always specify)

Course code _____

Semester _____

Examination
format _____

The performance is to be assessed for the following field _____

To be completed by the event organiser only!!

Name of event organiser

Credit Points

Grading

Seal / stamp

Faculty / supporting institution

Date

Signature of event organiser