**CERTIFICATE OF ATTENDANCE**

This is to certify that

**FULL NAME OF STUDENT**

successfully participated in the

**tropEd accredited Advanced Optional Module**

**'TITLE OF MODULE'**

at NAME OF YOUR INSTITUTION, COUNTRY

from DD – DD MONTH YYYY

The participant has been awarded **XY ECTS** credit points

for the XY-day/XY-week/full-time/part-time/campus-based/blended-learning (please add or delete as appropriate) course.

Place, DD MONTH YYYY

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Advanced Module Coordinator

Job Title of Advanced Module Coordinator

Name of Institution