

# EMPLOYER CONFIRMATION

## BACHELOR'S DEGREE PROGRAMME: RECOGNITION OF PROFESSIONAL EXPERIENCE

This form serves as proof of professional experience from the employer and can only be submitted in conjunction with an individual application.

### Details of the employee

First Name	<input type="text"/>	Last Name	<input type="text"/>
Adress	<input type="text"/>		
Postcode	<input type="text"/>	City	<input type="text"/>
Phone	<input type="text"/>	Email	<input type="text"/>
Student ID number (or date of birth)	<input type="text"/>		

### Details of the employer

Company name, legal form	<input type="text"/>		
Contact person	<input type="text"/>		
Adress	<input type="text"/>		
Postcode	<input type="text"/>	City	<input type="text"/>
Phone	<input type="text"/>	Email	<input type="text"/>

### Details of the position

Job title/position	<input type="text"/>			
Duration of professional experience from	<input type="text"/>	to	<input type="text"/>	
in the scope of	<input type="text"/>	weekly hours in full-time <input type="checkbox"/>	part-time <input type="checkbox"/>	other <input type="checkbox"/>

This competency certificate serves the purpose of recognition of professional achievements for the following module/s at IU International University of Applied Sciences.

<b>Module code<sup>1</sup></b> <input type="text"/> <input type="text"/>	<b>Module name<sup>1</sup></b> <input type="text"/> <input type="text"/>
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<sup>1</sup> The module overview and course contents can be found in the module handbook of your desired study programme on our [website](#).

**Details of the course contents and/or qualification objectives of the requested module<sup>2</sup>:**

<sup>2</sup> Here, the course contents and/or qualification objectives of the requested module must be inserted. The required information and data can be found in the corresponding module handbook on our [website](#). Alternatively, the individual job profile of the employee can be detailed.

I have read the module handbook and the guidelines. I am aware that recognition requires mastery of the academic content of the recognised (partial) module. By signing and submitting this document, I confirm that the employee has essentially mastered the competencies listed above and that all the details provided are truthful and complete.

Filling in and submitting this form does not constitute legal claim. The examination committee reserves the right to contact the aforementioned contact person if there are any queries. The examination committee also reserves the right to reject the recognition of previous achievements.

Upon completion of the examination and approval of the application, the result will be communicated via email to the applicant.

Place, Date

Legally binding signature, Employer's stamp

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<b>Module code<sup>1</sup></b> <input type="text"/> <input type="text"/>	<b>Module name<sup>1</sup></b> <input type="text"/> <input type="text"/>
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