

Statement from Leiden University

As part of guest student registration request

To be completed by the study adviser at Leiden University

Personal details student

Name:

Date of birth:

 (dd/mm/yyyy)

Email address:

Educational institution at which student is registered:

No objection statement

As study adviser at Leiden University I hereby declare that I have no objection to student following the following course(s) at Leiden University:

Name:

Signature:

**If you do not have a digital signature, please print and sign the form, then provide a scanned copy to the student.*

Date:

 (dd/mm/yyyy)

**Universiteit
Leiden**
The Netherlands