Statement from own educational institution

As part of guest student registration request

To be completed by the study adviser at the educational institution at which you are registered

Personal details student	
Name:	
Date of birth: (dd/mm/yyyy)	
(dd/fillil/yyyy)	
Email address:	
Educational institution at which student is registered:	
satement montation at which statement to registered.	
No objection statement	
As study adviser at the aforementioned educational institution I hereby dobjection to student following the following course(s) at Leiden Universit	eclare that I have no y:
Name:	
Signature:	
*If you do not have a digital signature, please print and sign the form, then p	provide a scanned copy to the stu
Date:	
(dd/mm/yyyy)	

