



Załącznik Nr 26  
do Zarządzenia Nr 93/2023  
z dnia 03.07.2023 r.  
stanowiący Załącznik Nr 38  
do Zarządzenia Nr 159/2012  
z dnia 19.09.2012 r.

City, date

.....  
(Faculty Stamp)

No.: .....

## CERTIFICATE

concerning completion of studies

This is to certify that

*Mr/Ms:* .....  
*Student register no.:* .....  
*Date of birth:* .....  
*Place of birth:* .....  
*Major:* .....  
*Specialization:* .....  
*Degree:* .....  
*Form of studies:* .....  
*Profile of learning:* .....  
*Date of commencement of studies:* .....  
*Duration of studies:* .....  
*Planned term of completing studies:* .....  
*Duration of professional internship:* .....  
*Lecture language:* .....

is a **graduate** of major ..... at the Medical University of Silesia in Katowice.

Mr/Ms .....commenced education on.....and **completed studies on:**  
..... obtaining the title of: ..... with the  
result:.....diploma no.: ..... date of diploma issuance: .....  
average of grades obtained in the course of studies: .....

The scale of grades in place in accordance with the Study Regulations of the Medical University of Silesia in Katowice:

very good (5,0)  
good plus (4,5)  
good (4,0)  
satisfactory (3,5)  
sufficient (3,0)  
unsatisfactory (2,0)

The certificate is issued at the request of the graduate.

.....  
(Signature and stamp of authorized person)