Certificate of enrolment

(01.04.2020-30.09.2020)

Student Number XXXXXX Page 1 of 1

Universität d. Saarlandes - Stud.-Sek., Postfach 15 11 50, 66041 Saarbrücken

Testina Muster

Alter Holzweg 66140 Saarbrücken Germany

ät des Saarlandes

nsekretariat tudiere Campus) 66123 Sa prücken

15 11 50 Saarbrücken

Testina Muster

Student Number **XXXXXX**

Date of birth 01.01.1990

Place of birth Saarbrücken

Is enrolled for 01.04.2020-30.09.2020) Summer semeste

Total number of 6 semesters studied

Semester	Course of study	Type of qualificat.		Subject	atus ⁽¹⁾	ss ^(*)	SPoS ^(**)	Reg. Type ⁽²⁾	Mode	Туре
Summer semester (01.04.2020-30.09.2020)	B.Sc • • tik	Bachelor of Science	-	nformatik (2015)	А	1.00	6	01	Full-time	Campus-based study programme
Summer semester (01.04.2020-30.09.20°	B.Sc. Sybersicherheit	helor of Science	B.Sc. C	sicherheit (2014)	А	5.00	6	01	Full-time	Campus-based study programme

Key:
- Headers: (*) No.s ıd., (**) Std. pe.

- Cell contents:

Attending

Certificate of enrolment

(01.04.2020-30.09.2020)



Testina Muster

Student Number 2990000

Date of birth 01.01.1990
Place of birth Saarbrücken

Is enrolled for Summer semeste 01.04.2020-30.09.2020)

Total number of semesters studied

6

Saarbrücken, 19. April 2