

**LANGUAGE CERTIFICATE**

To whom it may concern

I, the undersigned, …………………………………………………………………………………., Academic Coordinator at (*name of university*) ……………………………………………

……………………………………………………………, attest that the nomination for a Study Abroad Period for the Academic Year 2021-2022 for the student (*NAME and Firstname*) ……………………………………………………………………………………………

is based on his/her level of French Language knowledge, sufficient to attend courses within the **DEUF programme (Diplôme d’Etudes Universitaires Françaises)** at University Jean Moulin Lyon 3.

Date : Signature :