WORKPLACE CONFIRMATION LETTER

To whom it may concern

I hereby confirm that Mr/Ms	s/Mr	·s															
Identity/passport number:																	
Student number:]								
is teaching or has access to a below) for the duration of th								edia	te F	Phas	se le	earı	ner	s (á	as ir	ndic	ated
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Name of school:																	
School address (Physical and	Pos	tal):	:														
Postal code:																	
												_					
School stamp																	
Official stamp																	
o morar stamp																	