**International Education Verification Request Form**

**Requested information must be provided**

|  |
| --- |
| **Personal Information** |
| First name |  |
| Middle name (if available) |  |
| Last name |  |
| Full Name used while attending the university |  |
| Date of Birth |  |
| Citizen ID or Passport number |  |
| Email |  |
| Name as written in Country’s official language |  |
| **University Information** |
| Full name of the university & campus/department/faculty |  |
| Full address of the university |  |
| City/State or Provence/ Country |  |
| Phone number |  |
| Website (if available) |  |
| Contact details (email, name) of the person in charge for diploma verification |  |
| **Degree information**  |  |
| Degree obtained |  |
| Study programme |  |
| Grade Point Avarage (GPA) |  |
| Dates of attendance (from …to …)  |  |
| Date of graduation |  |
| Diploma number |  |
| Date of diploma issuance |  |

**AUTHORIZATION FOR RELEASE OF EDUCATION INFORMATION**

This release gives authorization to D. A. Tsenov Academy of Economics, Svishtov to verify my education at the above stated university. A copy of this authorization that bears my signature is valid as the original release signed by me.

**Printed name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_