**CERTIFICATE OF THE INSTITUTIONAL/DEPARTMENTAL RESEARCH**

I, the undersigned (full name of the **HEAD OF THE INSTITUTE**, his/her position at the university), hereby confirm that in the **spring** semester of the academic year **2020/2021** [your name] participated in the project entitled as:

**name of the project** (project ID).

|  |  |  |
| --- | --- | --- |
| August 27, 2021 | full name of the **HEAD OF THE INSTITUTE** |  |
| **Date of signature** | **Name** | **Signature** |