**TRANSCRIPT OF RECORDS**

**RECEIVING INSTITUTION**

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| Receiving Institution: |  |
| Sending Institution: | **Johannes Gutenberg-University (D MAINZ01)** |
| Name of student, First Name(s): |  |
| Subject area (code): |  |
| **Start date of the study period** [dd/mm/yyyy]: |  |
| **End date of the study period** [dd/mm/yyyy]: |  |

**ACADEMIC OUTCOMES AT THE RECEIVING INSTITUTION:**

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| **Component code (if any)** | **Component title at the receiving institution**  **(see course catalogue)** | **Was the component successfully completed?**  **[Yes / No]** | **Receiving institution grade** | **ECTS credits** |
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|  | To be continued on a separate sheet |  |  | Total: |

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| **The receiving institution**  Responsible person’s signature / stamp: Date: |

This document is not valid without the signature of a responsible person and the official stamp of the institution.

**TRANSCRIPT OF RECORDS**

**SENDING INSTITUTION**

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| Receiving Institution: |  |
| Sending Institution: | **Johannes Gutenberg-University (D MAINZ01)** |
| Name of student, First Name(s): |  |
| Subject area (code): |  |
| **Start date of the study period** [dd/mm/yyyy]: |  |
| **End date of the study period** [dd/mm/yyyy]: |  |

**RECOGNITION OUTCOMES AT THE SENDING INSTITUTION:**

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| **Component code (if any)** | **Title of recognised component at the sending institution**  **(see course catalogue)** | **Sending institution grade**  **(if applicable)** | **ECTS credits** |
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| **The sending institution**  Responsible person’s signature / stamp: Date: |

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