

Employer's Declaration

Declaration concerning the extent and type of employment for use in connection with application for admission to fulltime degrees at Cphbusiness.

It is hereby certified that

Name	CPR-number

during the period

From (date, month, year)	To (date, month, year)	Exact no. of working hours per week

has been employed by the undersigned as

Type of employment

Issued on the by

Date	Signature, address and stamp of employer
_____	_____