

**CERTIFICATE OF COMPLETION**

**Commissioned Education Course**

***(“Title of course”)***

***(Name and civic registration number)***

This is to certify that *(Name of Participant)* has successfully completed the course titled (*course name here*) at Dalarna University. The course commenced *(DD-MM-YYYY)* and concluded *(DD-MM-YYYY).* The course comprised (xx) hours/days over *(xx)* days.

The focus of the course was (….) and comprised the following components:

Course teachers were:

The course was commissioned by *(name of client)*.

Date *(Provide date)*

Signature of Principal Teacher \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *(Name)*

 *(Position/Title)*

 *(School/Department)*