Education Certificate

To whom it may concern,

This is to certify that 姓名**（**性别, born on month day, year**）**is now studying at Yangzhou University. His/Her(选一) student ID number is . He/She(选一) has been enrolled in学院名 , majoring in 专业名 from**（**入学时间）月，年to present, and is expected to complete the postgraduate education program in (毕业时间) 月，年if he/she(选一) meets all the graduation requirements of Yangzhou University.

Yangzhou University Medical College

Month Day, Year