12th World Congress of NeuroRehabilitation December 14–17, 2022

www.wcnr-congress.org

Proof of Status

Fax +49 3641 31 16-244

Herewith we confirm that	
\circ	Mrs./Ms.
\bigcirc	Mr.
	is a Non-physician or therapists (occupational therapist, speech therapist, physiotherapist, clinical psychologist, orthotics &
\bigcirc	prosthetics, social worker, nurses, special educator & others)
\circ	is a Trainee
\circ	is a PhD student
\circ	is a Resident
\circ	is a Fellow
in our company/institution/organisation.	
01:	
City,	Date Signature and Stamp