

Proof of Status

Herewith we confirm that

- ☐ Mrs./Ms _____
- ☐ Mr. _____

- ☐ is a PhD student
- ☐ is a therapists
- ☐ is a nurse
- ☐ is Medical staff in further education (without specialist title)
- ☐ is a technical assistants
- ☐ is a medical student in the practical year

in our company/ institution/ organisation.

- ☐ is currently on parental leave.

City, Date _____

Sign and Stamp of
Institution/ Organisation _____