



Certificate of Conformity Application Cover sheet/ Check list

GRADUATE'S INFORMATION

Surname	
First and middle name(s)	
Program	
Graduation year	
E-mail address	
POSTAL ADDRESS* (please type)	

*NIL will send the certificate to this address

Check List

	a copy of the diploma in Polish (both pages)
	supplement in Polish or in English (all pages)
	the statement confirming that the applicant does not possess the right to practice in Poland and has never applied for it, signed and dated in both language versions
	a confirmation of the payment of the fee the NIL chargers for each certificate