



Certificate of current studies at Karolinska Institutet

This is a certificate to attest that the person below is a student at Karolinska Institutet (KI), and therefore has the right to become a student member of Medicinska Föreningen i Stockholm (MF) for the current semester. This certificate is valid for one semester.

When you've filled it out – hand it in at one of the student union offices or email it to:
karx@medicinskaforeningen.se

Student

First name										Surname			
Personal/Identity number (YY-MM-DD-XXXX) If you don't have a Swedish personal number, state your date of birth.													
							-						

Type of student <i>You may choose more than one box</i> <input type="checkbox"/> Exchange student (Erasmus or other) <input type="checkbox"/> Internship <input type="checkbox"/> pre-PhD <input type="checkbox"/> Research assistant <input type="checkbox"/> PhD-student from another university <input type="checkbox"/> Other: _____	Start date
	End date
	Study activity (e.g. 100%)

Name of institution or programme at KI
Supervisor/Course responsible/Director of Studies

Place and date

Signature Supervisor
/Course responsible/Director of Studies

Signature student