



School of International Liberal Studies (SILS) WASEDA UNIVERSITY

Fill in all the boxes below

Proof of Honors and Activities

This is to certify that the following student,

Applicant's Name	
Date of Birth (YYYY/MM/DD)	

Has received the academic honor/participated (been participating) in the activity listed below:

Name of Honor/Activity	
Name of Institution	
Duration	From: To:

◆Certifier's Information

*This form must be completed by someone from the institution or applicant's high school.

Institution	Seal or Signature
Name	
Position/Title	
E-mail address	
Date(YYYY/MM/DD)	