**Der Präsident -**

**Vorstand Forschung und Lehre**

Studierendensekretariat OE 9130

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Frau/Herrn

Vorname Nachname

Straße Hausnummer

PLZ Ort

Land

MHH_L2_s

Medizinische Hochschule Hannover, Studierendensekretariat OE 9130

Carl-Neuberg-Straße 1, 30625 Hannover

08.06.2021

**Dean’s Letter**

Dear Sir or Madam,

This is to certify that *Mr / Ms Vorname Nachname, born XX.XX.XXXX in Geburtsort*/*Land* is a student in good standing at Hannover Medical School (Medizinische Hochschule Hannover) since *October Jahr, enrolment No. Matrikelnummer*.

*Mr / Ms Nachname* successfully completed the two year preclinical part of medical education and finished his/her preclinical studies in *September Jahr* covering anatomy and biology, physics and physiology, chemistry and biochemistry, psychology and sociology.

*Mr / Ms Nachname* has finished the following clinical subjects: general pharmacology and toxicology, general pathology, hygiene, medical microbiology, virology and infectious diseases, immunology, epidemiology, medical biometrics, medical informatics, prevention, health promotion, diagnostic methods, medical history and ethics, dermatology and venereal diseases, surgery, orthopaedics, urology, anaesthesia and emergency medicine, psychosomatic medicine, psychiatry and psychotherapy, clinical chemistry and internal medicine, gynaecology and obstetrics, paediatrics, human genetics, ophthalmology and neurology as well as otolaryngology.

The theoretical instructions are accompanied by bedside-teaching.

**Für PJ:** *Mr / Ms Nachname* would like to do a 16-week period of the 6th-year practical training at your institution.

**Für Famulatur**: *Mr / Ms Nachname* would like to do a *Zeitspanne-week* period of clinical clerkship at your institution.

*She / He* is an interested and keen student and therefore I can recommend this plan as very useful for *her / his* further medical education.

Yours faithfully,