OFFICIAL AUTHORISATION/ENDORSEMENT

**The undersigned:**

| *Full name of the Director* *(supervisor, employer)* |  |
| --- | --- |
| *Institution*  |  |
| *Address* |  |
| *Telephone* |  |
| *E-mail*  |  |
| **hereby endorse:**  |
| *Full name of the applicant* |  |
|

| **as candidate for the** UNIDROIT - INTERNATIONAL PROGRAMME FOR LAW AND DEVELOPMENT - IPLD 2025, |
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 |
|

| **authorise their participation in the course as an official capacity-building activity and guarantee that the candidate’s present position will remain available to them upon completion of the programme.**  |
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 |
| *Signature* |  |
| *Date*  |  |
|  |  |
| *Institutional stamp (if available)* |  |