

Scholarship Certificate

On behalf of the Board of Governors of:

Name educational institute: **Universidad Autónoma del Estado de Hidalgo**

Place: **Pachuca de Soto, Hidalgo, México**

Undersigned declares hereby that:

Surname student: **Leines Jimenez**

Given names student: **Cesar**

Date of birth: **25 May 1985**

Nationality: **Mexican**

Will receive during the period:

Starting date **01 / Septiembre/2009**

End date : **30 / september /2010**

A monthly scholarship of:

€ **1755**

The scholarship is funded by:

Name institute or company: **Universidad Autónoma del Estado de Hidalgo**

In the frame of:

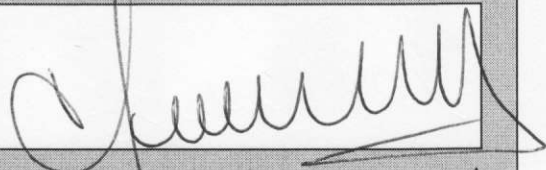
Scholarship programme: **Recursos Propios**

Date: **22nd June 2009**

Place: **Mineral de la Reforma, Hidalgo,**

Name: **Dra. Gabriela Castañón**

Signature:



Name Institute or Company funding the student: **Universidad Autónoma del Estado de Hidalgo**

Address: **Carr. Pachuca Tulancingo Km. 4.5 (CEVIDE) Ciudad Universitaria**

Postal code + city: **P.C. 42083 Mineral de la Reforma**

Telephone number: **+52 01 77 1 7 20 00 ext. 6021 or 6023**

Stamp educational institute:

