



# CERTIFICATE OF ATTENDANCE

This is to certify that

*Title Name Surname*

has attended the ECHOES Cyprus Demonstration Event on Thursday 8th May 2025 in Larnaca, Cyprus.

On behalf of the ECHOES Project Team, I would like to extend our sincere gratitude and appreciation to Title Name Surname for supporting the event organisation and planning.

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**Mr. David Smith, Director**  
International Network for Health Workforce Education

