

DIPLOMA

ON ACQUIRED MASTER'S DEGREE OF THE BOLOGNA SECOND CYCLE
HIGHER EDUCATION PROGRAMMES

NAME SURNAME

Birth date DD.MM.YYYY

In Place of birth

On DD.MM.YYYY

*Graduated at
Faculty of Media in Ljubljana
under the study programme*

MEDIA AND JOURNALISM

*therefore the Faculty of Media
in Ljubljana hereby confers the academic title*

**MASTER OF MEDIA
PRODUCTION**

with all the privileges appertaining thereto.

Number NNNN

In Place of delivery

On DD.MM.YYYY

Dean of Faculty of Media in Ljubljana Title, Name and Surname

FACULTY OF MEDIA