



REPUBLIC OF ARMENIA MINISTRY OF EDUCATION AND HIGHER EDUCATION
ARMENIAN REPUBLIC OF EDUCATION QUALITY ASSURANCE
2013 PROGRAMME QUALITY REPORT

Name: _____
 Address: _____
 Telephone: _____
 E-mail: _____

1. Name of the institution: _____
 2. Name of the programme: _____
 3. Name of the institution: _____
 4. Name of the institution: _____
 5. Name of the institution: _____
 6. Name of the institution: _____
 7. Name of the institution: _____
 8. Name of the institution: _____

№	№ of the institution	№ of the programme	№ of the institution	№ of the programme
1	1	1	1	1
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REMARKS:

I, ARMENIA REPUBLIC, hereby certify that the information provided in this report is true and correct and I am responsible for its accuracy.



25/10/2013