ERASMUS+

Letter of confirmation for TRAINING MOBILITY
- This document is only necessary if the host institution does not issue a confirmation of its own.

Academic Year 2016/2017

To whom it may concern

Name of institution: ____________________________________________________________

ERASMUS–Code: __________________________________________________________________

I herewith confirm that Ms./Mr. ___________________________________________ (title and name) has done a training/staff week stay in the framework of ERASMUS Staff Training in our institution.

Duration of stay (days): _____ from: ___________________ till: ___________________________

Date, place: ________________________________________________________________

___________________________________________________________________________

(Signature and stamp of the authorized person of the partner institution)