#

# ERASMUS STAY CONFIRMATION

Host University:

Student:

Home University:

## Arrival Form

**We confirm that the above mentioned student has arrived at our university on ........................ and will study for one semester/ full year in our department of** **..................................**

Signature................................................. Stamp

Name:

Position:

Date:

## Departure Form

**We confirm that the above mentioned student is leaving our university on .......................**

Signature................................................. Stamp

Name:

Position:

Date: