

STUDENT

Confirmation of study period/traineeship abroad

Family name:	
First name:	
Sex:	MALE FEMALE
Date and place of birth:	
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SENDING INSTITUTION	
Country:	CZECH REPUBLIC
Name of sending institution:	TECHNICAL UNIVERSITY OF LIBEREC
Faculty/Department:	
RECEIVING INSTITUTIO	N
Country:	
Name of receiving institution:	
Faculty/Department:	
This is to certify that the student ARRIVED at our institution on:// (day/month/year)	
Date:	Signed:(Receiving institution)
and FINISHED his/her study/traineeship period at our institution on:// (day/month/year)	
Date:	Signed:(Receiving institution)

- The period between the start and end date of the mobility should contain the preparatory language course, the orientation days ... NO vacation.
- The **ORIGINAL** of this document must be delivered by the student or posted by the host institution to the Technical university of Liberec, Czech republic at the end of the stay at the receiving institution abroad.

