

Confirmation of Erasmus+ study period

STUDENT

Family name:	
First name:	
Sex:	MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>
Date and place of birth:	

SENDING INSTITUTION

Country:	CZECH REPUBLIC
Name of sending institution:	TECHNICAL UNIVERSITY OF LIBEREC
Faculty/Department:	

RECEIVING INSTITUTION

Country:	
Name of receiving institution:	
Faculty/Department:	

This is to certify that the student **ARRIVED** at our institution on: ____/____/____/
(day/month/year)

Date: _____

Signed: _____
(Erasmus departmental/institutional coordinator)

and **FINISHED** his/her Erasmus period at our institution on: ____/____/____/
(day/month/year)

Date: _____

Signed: _____
(Erasmus departmental/institutional coordinator)

- 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 – ERASMUS office at the end of the ERASMUS stay at the receiving institution.

