ERASMUS + KA1 –2023/2024

LETTER OF CONFIRMATION

It is hereby certified that

Mr / Ms ................................................................................................

Participated in Erasmus+ studies at: …...………………………………………..

(the name of the receiving university)

Start of the mobility period: ......... …........ .............

day month year

End of the mobility period: ........ …........ .............

day month year

**To be completed by the receiving university:**

............................................. ..........................................................

Name of the legal representative: Function:

........................................................

Signature and Stamp:

**Please note**:

Any corrections in this document must be signed (and/or) stamped by the signatory

This form must be filled out completely in order to be accepted.