

Confirmation of Socrates/Erasmus stay at the host institution

Teaching staff mobility in the academic year

Name of the host institution:

Name of the host Department:

Name of the Socrates/Erasmus coordinator confirming the stay:

I confirm that _____ has visited our university/department from _____ . During his/her stay he/she held (5) teaching hours/tutoring hours. His/Her lectures were on the topic of “ _____ ”.

Name and signature of representative of the host institution:

Date: