 

**STATEMENT OF HOST INSTITUTION**

**Erasmus Programme**

**Staff Training Confirmation**

**Project No. 2021-1-HR01-KA131-HED-000004325**

**Staff data**

|  |  |
| --- | --- |
| Name: |  |
| Surname: |  |
| Date of Birth: |  |
| Home Institution:  Erasmus ID code  (eg. B BRUXEL01): | HR PULA01 |

The undersigned representative of the Host Institution hereby confirms that the above mentioned person has realized Erasmus mobility period at host Institution:

**Confirmation of Arrival**

|  |  |
| --- | --- |
| **\*Date of Arrival:** |  |

|  |
| --- |
| Name, Surname, and Position of the host HEI Representative:  Signature:  Date: |

**Confirmation of Departure**

|  |  |
| --- | --- |
| **\*Date of Departure:** |  |

|  |
| --- |
| Name, Surname, and Position of the host HEI Representative:  Signature:  Date: |

**\***it must not refer to the day of the travel but to the official first and last day of mobility at the receiving Institution.

The signature date cannot be earlier than the date of departure.

**Host Institution data**

|  |  |
| --- | --- |
| Host Institution:  Erasmus ID code  (eg. BE Bruxelles01): |  |
| Address, City, Country: |  |
| Host faculty, department, Unit |  |
| Contact person\*  Name, Surname, Title, Position  E-mail address |  |

* *Contact person may be professor, mentor, institutional, ECTS or Erasmus coordinator*