



Certificate of Arrival/Departure
Erasmus+ Partner Countries

Name & Surname of the Scholarship Holder:
Home Institution: Country:
Host Institution: Country:
Duration of Mobility: Level of Mobility: Bachelor Master PhD
ROUTE:
FROM (city, country): TO (city, country):
Means of Transportation:

To be completed AT THE BEGINNING of the mobility

CONFIRMATION OF ARRIVAL
Date of Arrival at the Host Institution:
Scholarship Holder's Signature: Date:
Host Institution Coordinator Name:
Stamp and Signature: Date:

To be completed AT THE END of the mobility

CONFIRMATION OF DEPARTURE
Date of Departure from the Host Institution:
Scholarship Holder's Signature: Date:
Host Institution Coordinator Name:
Stamp and Signature: Date: