



CERTIFICATE OF ATTENDANCE

MoU (Memorandum of Understanding) PROGRAMME
STAFF MOBILITY
For the 20.. -20.. Academic Year

This is to confirm that

.....full name.....

from **ISTINYE UNIVERSITY**

has participated atteaching/training mobility.....

within the MoU (Memorandum of Understanding) Programme.

Dates of the mobility: From [day/month/year] to [day/month/year]

Subject Field	
Topics Taught	
Level	<input type="checkbox"/> Academic Staff <input type="checkbox"/> Administrative Staff
Other activities (If any) <i>*If there is any point you would like it to be mentioned, please state it.</i>	

Responsible Person at the Hosting Institution

STAMP

Name/Surname:
Position:
Date and Place:
Signature: