**CERTIFICATE OF ATTENDANCE**

**ERASMUS+ PROGRAMME**

 **STAFF MOBILITY FOR TEACHING/TRAINING**

**20..-20.. Academic Year**

This is to confirm that

 *…full name…*

from *…(sending institution)…*

has participated at ***…****teaching/training mobility…*

 within the Erasmus+ Programme Staff Mobility for Teaching/Training.

**Dates of Lecturing/Training:** From *[day/month/year] to [day/month/year]*

|  |  |
| --- | --- |
| **Subject Field**  |  |
| **Topics Taught/Learnt** |  |
| **Level** | ☐ Administrative Staff ☐ Academic Staff |
| **Other activities****(If any)** |  |

**Responsible Person at the Host Institution STAMP**

**Name/Surname:**

**Position:**

**Date and Place:**

**Signature:**