

**CONFIRMATION OF INTERNSHIP PERIOD**

Name of student**:**

**ARRIVAL**

We certify that above named student has been enrolled as an Erasmus INTERN at:

**………………………………………………………………………………………..**

Date of arrival:

Name of Signatory:

Position:

Stamp and signature:

**DEPARTURE**

We certify that above named student has complited his/her internship period at the

……………………………………………………………………………………

Date of departure:

Name of Signatory:

Position:

Stamp and signature: