Erasmus+ - Academic Year 2023/2024

**CERTIFICATE OF ATTENDANCE**

* **AT THE END OF THE STUDY PERIOD:** we kindly ask **the HOST UNIVERSITY** to fill in, stamp and sign this certificate and **SEND THE DOCUMENT BY E-MAIL** to erasmus.outgoing@univpm.it and to the student’s e-mail address

**We cannot accept certificates of attendance sent by the students**

|  |
| --- |
| **STUDENT’S DATA** |
| Name and Surname  |  |
| UNIVPM Matriculation Number |  |
| Faculty/Department at UNIVPM |  |
| Sending Institution | Università Politecnica delle Marche – I ANCONA01 |
| Host University’s Erasmus Code |  |

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| **MOBILITY PERIOD** |
| The student completed a **physical mobility** |
| Duration of the mobility | from | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| to | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**To be filled in by the host University**

University Stamp

Signature: …………………………………………….

Name: …………………………………………………

Position: ………………………………………………