**Erasmus + KA107 – 20XX/20XX Length of mobility period**

Dr./Mr./Mrs.

Position

From (School/Faculty/Department/Institute)

This is to certify that Mr/Ms

coming from XXXXXXX University of XXXX (XXX)

has been an exchange staff

between \_\_\_\_\_/\_\_\_\_\_\_\_\_\_ /\_\_\_\_\_ *(day/month/year)*

and \_\_\_\_\_/\_\_\_\_\_\_\_\_\_ /\_\_\_\_\_

As agreed in the Working Plan, Professor XXXXX has taught 8 hours of class to (Undergraduate, master, PhD) students, concerning XXXXXX, during the stay

Stamp and Signature

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Do not sign before departure date*