**CONFIRMATION**

**OF ERASMUS+ STAFF TRAINING MOBILITY**

 This is to confirm that

…………………………………………………………………………………………………

(Full Name of Academic staff)

Undertook an Erasmus+ training mobility

at

……………………………………………………………………………………………….

ERASMUS CODE: **………………………**

In the area of

…………………………………………………………………………………………………

Department/Faculty

On the following dates:

(include only the dates that the staff has completed their training activity in the university)

From: To:

Signature:

..............................................

Date

..................................

Stamp