

Confirmation of Erasmus teaching programme 2016/2017

TEACHER

Family name:	
First name:	

SENDING INSTITUTION

Country:	
Name of sending institution:	
Faculty/Department:	

RECEIVING INSTITUTION

Country:	
Name of receiving institution:	
Faculty/Department:	

This is to certify that the teacher undertook the teaching assignment under the Erasmus programme at our institution from ___/___/___ to ___/___/___ of the 2016/2017 academic year. The total number of teaching hours delivered at our institution was _____.

Main content of the teaching assignment (name of the lecture/seminar, other activities):

Date: _____

Signed: _____

(Erasmus departmental/institutional coordinator)