CERTIFICATE OF ATTENDANCE

I, the undersigned Mr/Mrs …………………………………………………………………………..…… , *(Name, Surname and Position of the contact person from the Receiving Organisation)*

certify that Mr/Mrs ……………………………………………………………………………………….…..… *(Name and Surname of the Participant)*

*……………………………………………………………………………………………………………………*

*(Specify the status of the learner or the position of the staff concerned by the mobility activity)*

has undertaken a mobility activity in form of a:

*(Please choose the correct item depending on the type of mobility)*

[ ]  *Student Mobility for Studies*

[ ]  *Student Mobility for Traineeships*

This mobility activity took place at

*(Name and Address of the Receiving Organisation and/or the location of the activity if applicable)*

*………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………*

Identification number (Only for Companies)

*………………………………………………………………………………………………………*

From ………………………………………… to ……………………………………………… (included) *(Specify the start and end date of the mobility activity)*

SIGNATURE OF THE CONTACT PERSON FROM THE RECEIVING ORGANISATION

STAMP OF THE RECEIVING ORGANISATION DATE: