

## Erasmus+

### Confirmation of Stay for Teaching Staff

**Academic Year 2023/24**

Name of receiving institution: \_\_\_\_\_

Erasmus code of receiving institution: \_\_\_\_\_

I herewith confirm that: \_\_\_\_\_ (title and name)

has been in our institution.

Duration of stay (days, excluding travel days): \_\_\_\_\_ from: \_\_\_\_\_ till: \_\_\_\_\_

Number of teaching hours: \_\_\_\_\_

Date, place: \_\_\_\_\_

(Signature and stamp of the authorized person of the partner institution)