



Team Auslandsstudium
Abteilung Internationales
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Confirmation of Host Institution

It is hereby confirmed that

Mr./Ms. _____ (name of student)

Home University: Universität Hamburg, Germany

will be studying, doing research, an internship, training, a language course

at our institution

from _____ (day/ month/ year) to _____ (day/ month/ year)*.

Full name of receiving Institution: _____

City _____ Country _____

Name of Signatory: _____

Function of Signatory: _____

Date: _____ Signature: _____

Official Stamp or Seal of Institution:

***Important information for host universities:**

Please do not fill in the general semester dates but the actual study/research period from the first day of study (including orientation week, if applicable) or research to the last day of study (including exam period) or research of the student. If the student stays for more than one semester, please fill in the last day of study of the whole period.