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| --- | --- |
|  | ***Erasmus+ Programme*** ***STAFF MOBILITY FOR TEACHING and training*** |

#

# **CONFIRMATION**

***STAFF MEMBER***

|  |  |
| --- | --- |
| Name |  |

***SENDING INSTITUTION***

|  |  |
| --- | --- |
| Name of sending institution | **Lublin University of Technology** |
| Erasmus ID code | **PL LUBLIN03** |
|  |  |

***RECEIVING INSTITUTION***

|  |  |
| --- | --- |
| Name of receiving institution |  |
| Erasmus ID code |  |

This is to certify that the above mentioned person has attended the 4-hour staff training and has taught 4 hours of lectures under the Erasmus+ blended mobility at our institution from ............/............../............... to ............./............./............. of the academic year **202....../202......**.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Stamp: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_