



CONFIRMATION OF STUDY PERIOD



This document must be signed and stamped by any responsible person from the International Office of the Host Institution.

Arrival at Host Institution

The student from Ege University has reported to this office on /..... / as an Erasmus Student at

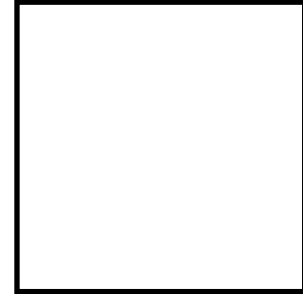
(Name of the Institution-Erasmus Code).

Name of Signatory:

Function:

Signature:

Date:



Stamp of Host Institution

Departure from Host Institution

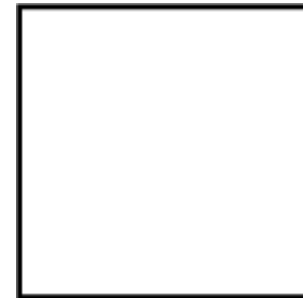
The studenthas successfully completed the period of study at this Institution on /..... /..... .

Name of Signatory:

Function:

Signature:

Date:



Stamp of Host Institution

The original document must be submitted by the student to the responsible person at the International Relations Office of Ege University.