**ERASMUS Staff Mobility -** Certificate of Attendance

|  |  |
| --- | --- |
| **Name of host institution:** |  |

I herewith confirm that Ms/Mr\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, of the University of Mannheim, Germany, has spent an (please tick as appropriate)

[ ]  Erasmus teaching period *or* [ ]  Erasmus training period *or*  [ ]  Combination Erasmus training and teaching period

at our institution at the below mentioned dates.

*In case of teaching stays:* I confirm that he/she has taught **\_\_\_\_\_ hours** in the framework of the ERASMUS Teaching Staff Mobility in our institution.

|  |  |
| --- | --- |
| **Duration of stay**  | from \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_to \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_ |

The start and the end date of the mobility period shall be the first day that the participant needed to be present at the receiving institution and the end date shall be the last day the participant needed to be present at the receiving institution.

This form shall be signed at the END of the stay!

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

Signature and Stamp

of the authorized person of the host institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Vom Teilnehmer auszufüllen (falls zutreffend) / To be completed by the participant (if applicable):**

|  |  |
| --- | --- |
| Zusätzlicher Tag für Anreise / Additional day for travel (arrival): | \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_ |
| Zusätzlicher Tag für Abreise / Additional day for travel (depart.): | \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_ |

Unterschrift des Teilnehmers/

Signature of the participant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Bitte als Scan senden an/ Please send a scan of this confirmation to:**

Gela Wittenberg, International Office, University of Mannheim

E-mail : wittenberg@verwaltung.uni-mannheim.de