**Confirmation of ERASMUS+ Study Period**

Academic Year 20\_\_/20\_\_

|  |  |
| --- | --- |
| This is to certify, that **Ms./Mr. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  (name of student)  from the **Hochschule Trier** (D TRIER02) is enrolled as an exchange student: | |
| **Name of receiving institution:** |  |
| **Erasmus code of receiving institution:** |  |

**Please sign below at the beginning of the study period:**

|  |  |
| --- | --- |
| **First Day of Study**:  (including orientation and/or language course) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (day, month, year) |
| Name of Signatory (at receiving institution): |  |
| Function of Signatory: |  |
| (Date/Stamp/Signature of Responsible Person in the Receiving Institution) | |

**Please sign below at the end of the study period:**

|  |  |
| --- | --- |
| **Last Day of Study**:  (including exams) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (day, month, year) |
| Name of Signatory (at receiving institution): |  |
| Function of Signatory: |  |
| (Date/Stamp/Signature of Responsible Person in the Receiving Institution) | |