



LETTER OF CONFIRMATION ERASMUS+ PROGRAMME
(Anhang IV des Grant Agreements)

TO WHOM IT MAY CONCERN

NAME OF INSTITUTION/ENTERPRISE

ERASMUS-CODE (if applicable)

I herewith confirm that

NAME OF PARTICIPANT

DATE OF BIRTH

has been enrolled at our University as an Erasmus-student

from _____ **to** _____
(DAY/MONTH/YEAR) (DAY/MONTH/YEAR)

Date	Place	
Name	Function	
Signature of the authorized person of the partner institution		Stamp

This certificate must not be signed before the mobility period has ended.