**ERASMUS+ in academic year ..../....**

**CONFIRMATION OF STUDY/TRAINEESHIP PERIOD**

Short-term mobility

***(to be filled at student’s departure)***

This is to confirm that ………………………………………………………………………………………………………………………………………,

from the University of Gdansk (PL GDANSK01),

was participating in studies/traineeship at………………………………………………………………………………………………………….

BIP title (if applicable):………………………………………………………………………….

Period of the physical mobility:

**from** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*(day – month – year) (day – month – year)*

If applicable, period of the virtual mobility:

**from** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*(day – month – year) (day – month – year)*

 *……………………………..……………………*

 *(Signature and stamp of the host institution)*