

DEPARTURE CERTIFICATE

Academic year 20 /20

Receiving Institution

Name of the Receiving Institution:

Country:

Erasmus Code (Only for Erasmus Studies):

Kind of Mobility

Mobility for Studies:

Mobility for Internship:

Certificate

Hereby we confirm that (Name of the student)

from Universitat Abat Oliba CEU (E BARCELO31) has been enrolled in our institution/Company within the frame of the: Erasmus+ Program (European Countries)

UAO CEU International Program (Non-European Countries)

The student stayed from (date of arrival) until (date of departure)

Place:

Date:

Name and Title of the responsible person from the receiving institution:

Signature:

Stamp: