

**Confirmation of Arrival**

20../20..

|  |  |
| --- | --- |
| Sending Institution | |
| Name of the institution: | Kastamonu University |
| Erasmus code: | TR KASTAMO01 |

|  |  |
| --- | --- |
| Receiving/Host Institution | |
| Name of the institution: |  |
| Erasmus code: |  |
| Country: |  |

|  |  |
| --- | --- |
| Student | |
| First and family names: |  |
| Date of birth (*dd/mm/yy*): |  |
| Field of study: |  |
| Type of mobility: | Study  Traineeship |
| Form of mobility: | Physical  Online  Blended |

It is hereby confirmed that the above mentioned student arrived at our institution/organisation on the following date:

|  |
| --- |
| Date of arrival |
| ... / ... / 20... |

Signed and stamped on behalf of the host institution\*.

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*(title, name, position and signature) (stamp) (date and place)*

*\*This form should be completed by the host institution at the beginning of the mobility period and sent to erasmus@kastamonu.edu.tr within* ***5*** *days.*