

**CERTIFICATE OF ARRIVAL**

Name and address (or Erasmus code) of host institution:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

hereby confirms that

name of student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

arrived at our institution

on \_\_/\_\_/\_\_\_\_

Estimated date of departure on \_\_/\_\_/\_\_\_\_

Name of signatory: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_/\_\_/\_\_\_\_

Signature:

Stamp of the institution:

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| After filling this form, please submit it at**traineeships@mruni.eu** |

International Office, Mykolas Romeris University
Ateities str. 20, Vilnius LT-08303, Lithuania
Tel./Fax. +370 5 2714 695; Tel. +370 5 2714 578; Email: traineeships@mruni.eu;