



CONFIRMATION OF STUDIES ABROAD 20..... - 20.....

Name of student:.....

Host university:.....

Erasmus code:.....

Student's contact information

Email/Phone.....

Confirmation of Arrival

We confirm that the above-mentioned student has arrived at our university and is registered at Faculty/Department:

.....

For a stay from...../...../..... until...../...../.....

Coordinator at host university:

E-mail:

Signature: Stamp:

Name:

Function:.....

Date:

Confirmation of Departure

We confirm that the above mentioned student is leaving our university on:/...../.....

Signature:..... Stamp:

Name:

Function:.....

Date:

Please email this document to the International Relations Office at Mid Sweden University upon arrival and departure of the student.