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Letter of Confirmation for Staff Mobility for Training

Academic Year 20\_\_/20\_\_

To whom it may concern

Name of host institution:

I hereby confirm that Mr/Ms

from (home institution) **University of Veterinary Medicine, Vienna**

has taken part in the framework of the ERASMUS Staff Mobility for Training Programme in our institution / enterprise.

Duration of stay (in days): from: until:

Duration of training (hours):

Date, place: ,

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Signature of the authorized person of the partner institution |  | Stamp |