****

**Staff Mobility**

***Name and address of Host Institution:***

**20.. / 20..**

|  |  |
| --- | --- |
| **CERTIFICATE OF ATTENDANCE**  We hereby confirm that  ……………(*Name of the Staff)*…………  from  ERZURUM TECHNICAL UNIVERSITY  has attended    Staff Teaching   Staff Training  Mobility within the frame of Erasmus+ Programme  at  …………*(Name of the Host Institution)*………….  from …/…/….  to …/…/….  Name and function of the authorized person at host institution :  Signature: Stamp:  Place :  Date : |  |