

## ERASMUS+ Academic Year 2020/2021 PERIOD OF STAY

To be filled out by any responsible person at the International Office of the Host Institution

**This section should be completed and signed no later than two days before or after the actual arrival date.**

Arrival at host Institution

We herewith confirm that the student \_\_\_\_\_

enrolled in \_\_\_\_\_ (study field) coming from THM University of Applied Sciences is being hosted as an ERASMUS+ exchange student.

To be completed at student's arrival (start): Date \_\_\_\_\_ (dd.mm.yyyy),

Online mobility: \_\_\_\_\_ (dd.mm.yyyy), face-to-face mobility: \_\_\_\_\_ (dd.mm.yyyy)

Expected end date: \_\_\_\_\_ (dd.mm.yyyy)

Online mobility: \_\_\_\_\_ (dd.mm.yyyy), face-to-face mobility: \_\_\_\_\_ (dd.mm.yyyy)

Name of Institution: \_\_\_\_\_

Name of the officer: \_\_\_\_\_

Date of signature: \_\_\_\_\_ (dd.mm.yyyy) Signature: \_\_\_\_\_

Official stamp:

Please send this document upfront via E-Mail to [auslandssemester@thm.de](mailto:auslandssemester@thm.de).

Departure from host Institution

**This section should not be completed and signed more than two days before the actual end of study period.**

It is hereby certified that the above named student was enrolled as an ERASMUS+ student at our institution

**ONLINE** from \_\_\_\_\_ (dd.mm.yyyy) to \_\_\_\_\_ (dd.mm.yyyy)

**FACE-TO-FACE** from \_\_\_\_\_ (dd.mm.yyyy) to \_\_\_\_\_ (dd.mm.yyyy)

Name of Institution: \_\_\_\_\_

Name of the officer: \_\_\_\_\_

Date of signature: \_\_\_\_\_ (dd.mm.yyyy) Signature: \_\_\_\_\_

Official stamp:

**The original of this document shall be returned by the student to:**

Technische Hochschule Mittelhessen  
International Office  
Wiesenstraße 14  
35390 Gießen/Germany