CERTIFICATE OF PRESENCE

Beginning of the stay

es that	
Internship ending date	
t will complete his/her mobility in our	
This form must be completed and signed by your host institution upon arrival and at the end of your stay.	
Date, Name, signature and stamp of host institution	

Send to sri@univ-tln.fr

This certificate is compulsory and conditions the payment of the scholarship (if granted).

CERTIFICATE OF PRESENCE

Departure of the stay

Host institution:		
Country:		
Represented by:		
Certifies that		
Student's last and first name:		
Internship beginning date	Internship ending date	
I hereby confirm that the above-named student has completed his/her mobility in our institution under the above-mentioned conditions.		
This form must be completed and signed by your host institution upon arrival and at the end of your stay.		
Date, Name, signature of student	Date, Name, signature and stamp of host institution	

Send to sri@univ-tln.fr

This certificate is compulsory and conditions the payment of the scholarship (if granted).