**CERTIFICATE OF ATTENDANCE**

**STAFF MOBILITY FOR TEACHING**

It’s hereby certified that:

|  |  |
| --- | --- |
| Name of teacher: |       |
| Name home institution/enterprise: | Politecnico di Milano |
| Erasmus ID code home institution: | I MILANO02 |

participated in a teaching assignment at:

|  |  |
| --- | --- |
| Name host institution: |       |
| Erasmus ID code host institution: |       |
| Contact person host institution: |       |

|  |  |
| --- | --- |
| Period of the teaching activity: | from to  |
| Duration of teaching assignment in hours (minimum 8): |       |

within the framework of ERASMUS+ Teaching Mobility and in accordance with the Teaching Programme.

**SIGNATURE AND STAMP:**

On behalf of the host institution,

Date:

Place:

Signature:

(Name)

(Position)