**YILDIZ TEKNİK ÜNİVERSİTESİ**



**CONFIRMATION OF ERASMUS MOBILITY**

**Academic Year: 20..... / 20.....**

*Upon arrival at your host institution, have* ***Section 1*** *of this form signed and stamped by your host institution, and return it to your home institution. At the end of your mobility, have* ***Section 2*** *signed and stamped by your host institution, and return this form to your home institution.*

­­­

**Student’s name:** .........................................................................................................................................

**Name of the host institution:** .....................................................................................................................

**Erasmus ID Code (if available):** .................................................................................................................

**Faculty/Department:** ..........................................................................................................................

­­­

**SECTION 1 – CONFIRMATION OF ARRIVAL**

I hereby confirm that the above student has started his/her study period at our institution on (date):

................................................................................... .

**STAMP OF HOST INSTITUTION**

**Name:** ..........................................................................

**Title:** ............................................................................

**Signature:** ....................................................................

**Date of signature**: ........................................................

**SECTION 2 – CONFIRMATION OF DEPARTURE**

I hereby confirm that the above student has completed his/her study period at our institution on (date):

................................................................................... .

**STAMP OF HOST INSTITUTION**

**Name:** .........................................................................

**Title**.: ..........................................................................

**Signature:** ...................................................................

**Date of signature**: .......................................................