



ERASMUS 20..../ 20.....

CONFIRMATION

This is to confirm that _____
(first name and surname)

an academic of The Maria Grzegorzewska University,

has taught _____ hours in the framework of the ERASMUS+ Teaching Staff

at _____
(name of receiving institution)

from _____ to _____
(day, month, year) *(day, month, year)*

(Signature and stamp of the hosting institution)