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**ERASMUS+ STAFF MOBILITY**

**Certificate of Attendance**

This is to certify that:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Full name)

from

**LUDOVIKA UNIVERSITY OF PUBLIC SERVICE (HU BUDAPES54)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name and Erasmus Code of Sending Institution)

has fulfilled one of the following staff mobility activities:

󠄀 For Teaching 󠄀 For Training

and therefore has been present at

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name and Erasmus Code of Host Institution)

From: \_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_ To: \_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_

Where applicable for teaching mobility, number of teaching hours: \_\_\_\_

**Place, Date**

 ……………………………………………………………….

 **Name/ Position**