**ERASMUS + 20…/ 20…**

**Letter of Confirmation for Teaching Stay Abroad – Credit Mobility**

This form is to verify the exact data of the ERASMUS+ teaching period abroad. It has to be signed by the International Office/ ERASMUS coordinator of the host university, or by the representative of the guest faculty.

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| --- |
| **Name of Teaching Staff** |
| Last Name:  |
| First Name:  |

|  |
| --- |
| **Details about teaching stay abroad** |
| Name of Host University:  |
| Name and Function of Signatory:  |
| E-Mail:  |

|  |
| --- |
| **Dates of Guest Lecture (Please indicate exact dates)** |
| Date of Arrival:  |
| Date of Departure:  |
| Number of Teaching Hours Completed: 8[[1]](#footnote-1) |

Date, Place Signature and Stamp

ERASMUS Coordinator/Responsible person

Host University

1. Minimum requirement: 8 teaching hours [↑](#footnote-ref-1)