Host institution LOGO

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**Certificate of Attendance**

**Learning/Teaching/Training Activities**

**(Project Number)**

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| As legal representative of hosting organisation (complete name, city,country),I hereby certify that the following persons: Mr/Mrs (function)  Mr/Mrs (function) Representing the visiting school (complete name,address, city,country) were present from (XX) to (XX) and attended a (choose the activity which applies) ❒ Short-term joint staff training events  ❒ Short-term exchanges of groups of pupils  ❒ Long-term teaching or training assignments  ❒ Long-term study mobility of pupils |

(If case of pupil exchanges, introduce a list of the participants in the activity)

(Place), (date)

(Signature & stamp)

Name and surname

Position