



Erasmus Confirmation of Start of Internship Period

This form has to be signed by the contact person at the hosting company/institution in the beginning of the internship.

Please certify that the following student has started her/his internship at the below mentioned company/institution. The student will receive the Erasmus grant according to the dates stated on this form.

To be filled in by the student:

Full name of student:

Date of Birth (yymmdd – xxxx):

Internship place:

Dates of internship: _____ to _____

Please indicate the exact dates for the internship period

To be filled in by the contact person at the internship:

.....
Name of the signatory and function

.....
Date and signature

Company logo/stamp here

****Note: this document cannot be signed more than 5 days before the internship period starts. Digital signatures and stamps are permitted.****