



Sveriges lantbruksuniversitet
Swedish University of Agricultural Sciences

Division of Educational
Affairs
Mobility Team

Erasmus ICM confirmation of start of mobility period

To be filled in the beginning of the exchange period

This form must be signed and stamped by a university official at the host University before sent back to SLU. The student will receive the Erasmus ICM grant according to the dates stated on this form.

Please certify that the following student is registered as an exchange student at your institution.

To be filled in by the student;

Name of student;

(Family name, name)

Date of Birth; (yymmdd- xxxx)

For studies at

(University and department)

Mainly in the subject area of:

To be filled in by a University official;

Between;

Please state the planned dates (exact dates, yymmdd) for the student mobility period for this student.

Signature, International Office at host university (or similar),

Date,

Stamp,