Leuphana Universität Lüneburg

International Center

Universitätsallee 1

D-21335 Lüneburg

ERASMUS+ Staff Mobility for Teaching

Letter of Confirmation

|  |  |
| --- | --- |
| Faculty member |  |
| Sending institution | Leuphana Universität Lüneburg |
| ERASMUS code | D LUNEBUR01 |
| Receiving institution |  |
| ERASMUS code |  |

It is hereby confirmed that the above named faculty member has conducted the mobility programme in the framework of the ERASMUS+ staff mobility for teaching in accordance with the mobility agreement at the dates and terms indicated below.

|  |  |  |
| --- | --- | --- |
| Period of the teaching activity | from   /  /   till   /  /   [dd/mm/yy] | |
| Duration in days |  | |
| Subject field |  | |
| Level | Short cycle  1st cycle / Bachelor | 2nd cycle / Master  3rd cycle / Doctoral |
| No. of students at receiving institution benefitting from the mobility programme |  | |
| Number of teaching hours |  | |

Name and signature of responsible person at the host institution

|  |  |
| --- | --- |
| Name: |  |
| Position: |  |

Place and date Signature

Please hand this form over to our faculty member.