Certificate of Participation

# To be completed by the partner institution

Category: Teacher mobility

 Staff mobility

I, the undersigned certify that Professor/Dr./Mr./Mrs. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

from Vrije Universiteit Amsterdam participated in the ERASMUS+ PROGRAMME:

from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ .

Name:

Official Function:

Institution:

Date:

Official Seal of Institution