**CONFIRMATION**

**Duration of Exchange Studies at Host Institution**

Student

|  |  |
| --- | --- |
| *First name* |  |
| *Family name* |  |
| *Date of birth* |  |

Sending institution

|  |  |
| --- | --- |
| *Name* | Kaunas University of Technology |
| *Faculty/Department* |  |
| *Country* | Lithuania |

Receiving institution

|  |  |
| --- | --- |
| *Name* |  |
| *Faculty/Department* |  |
| *Country* |  |

This is to certify that the student has attended our institution during the autumn semester of the academic year 2018/2019.

**Period of stay:** from to

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| *dd* | *mm* | *yy* |  | *dd* | *mm* | *yy* |

|  |  |
| --- | --- |
|  \_\_\_\_\_\_\_\_ \_\_\_\_*Name* \_\_\_\_\_\_\_\_\_\_*Signature of the international coordinator at the receiving institution* \_\_\_\_\_\_\_\_ \_\_\_\_*Date* | *Stamp of the receiving institution* |