
Adam Mickiewicz University in Poznan
International Relations Office

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CONFIRMATION OF ERASMUS STUDY PERIOD

This is to confirm, that the student _____
coming from _____
is being hosted at Adam Mickiewicz University in Poznan, **Faculty of Educational Studies**
within the framework Erasmus + program.

1. To be completed at student's arrival

Data of student arrival: ____/____/_____

Name of the host Institution: **Faculty of Educational Studies, AMU in Poznan**

Erasmus code: PL POZNAN01

Name of the signatory: Mateusz Marciniak, PhD, mateusz.marciniak@amu.edu.pl

Position: Faculty Coordinator Erasmus+

Date: ____/____/_____

Stamp and Signature

2. To be completed at student's departure

Data of student departure: ____/____/_____

Name of the host Institution: **Faculty of Educational Studies, AMU in Poznan**

Erasmus code: PL POZNAN01

Name of the signatory: Mateusz Marciniak, PhD, mateusz.marciniak@amu.edu.pl

Position: Faculty Coordinator Erasmus+

Date: ____/____/_____

Stamp and Signature