Host institution LOGO

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**Certificate of Attendance**

**Learning/Teaching/Training Activities**

**(Project Number)**

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| As legal representative of hosting organisation (complete name, city,country), I hereby certify that the following persons:Mr/Mrs (function)Mr/Mrs (function)Representing the visiting school (complete name,address, city,country) were present from (XX) to (XX) and attended a (choose the activity which applies)❒ Short-term joint staff training events❒ Short-term exchanges of groups of pupils❒ Long-term teaching or training assignments❒ Long-term study mobility of pupils |

(If case of pupil exchanges, introduce a list of the participants in the activity)

(Place), (date)

 (Signature & stamp)

Name and surname

Position