**CERTIFICATE OF ATTENDANCE**

TEACHING STAFF MOBILITY 2023/2024

**Surname and forename of visiting staff:** ….…………………………………………………...

**Institution visited:** ……………………………………………………………………………...

**ERASMUS code:** ……………………………………………………………………………….

**Subject area name:** …………………………………………………………………………….

**Subject area code:** ……………………………………………………………………………...

**Date of teaching activities:** from (day/month/year)..........................................................................

until (day/month/year) ..........................................................................

**Days of the activity** (in days)

…………………………………………………………………...

**Number of teaching hours:** .......................................................................................................................

**Language of instruction:** ...........................................................................................................................

# Level of teaching (under-graduate, post-graduate, doctoral):

# ……………………………………………………………………………………………….

**Content of the teaching programme** (course titles, hours number, didactic methodology)

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Date and Signature: ............................................... Stamp