



ΧΑΡΟΚΟΠΕΙΟ ΠΑΝΕΠΙΣΤΗΜΙΟ

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L.L.P. / ERASMUS - STUDENT MOBILITY FOR STUDIES - SMS

CONFIRMATION of ARRIVAL and REGISTRATION

OF OUR OUTGOING ERASMUS STUDENT AT THE RECEIVING INSTITUTION

To the ERASMUS Coordinator or the International Officer of the HOST University

*Thank you for filling in the following form and sending it back **WITHIN THE 2 FIRST WEEKS** to:*

Dr. E. Durie

ERASMUS Office

HAROKOPIO UNIVERSITY

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– or scanned at e-mail box edurie@hua.gr or erasmus@hua.gr

It is hereby certified that

Ms/Mr _____

Date of birth (dd.mm.yy.) _____

Student of HAROKOPIO UNIVERSITY (G KALLITH 01)

[Temporary address _____

is enrolled as an exchange student – ERASMUS

at the (Name of Host University) _____

(ERASMUS ID CODE) _____

Faculty _____

Department _____

For the period : from _____ to _____

under the Matricule Number _____

DATE OF ARRIVAL (first contact at the Receiving Institution): _____

Full name _____ Signature : _____

Title: _____ Date : _____
or position

Stamp :