

ΧΑΡΟΚΟΠΕΙΟ ΠΑΝΕΠΙΣΤΗΜΙΟ

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______ 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 : _____ _____ Date : _____ Title: or position Stamp: