

## ΧΑΡΟΚΟΠΕΙΟ ΠΑΝΕΠΙΣΤΗΜΙΟ

EΛ. BENIZEΛΟΥ 70, 176 71 ΑΘΗΝΑ – ΤΗΛ.: 210-9549100, FAX: 210-9577050

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

## **CONFIRMATION OF ATTENDANCE**

## OF OUR OUTGOING ERASMUS STUDENT AT THE RECEIVING INSTITUTION

To the ERASMUS Coordinator or the International Officer or Exchange Student Coordinator of the HOST University. Thank you for filling in the following form **AT THE END OF THE ERASMUS PERIOD** and giving it to the student when leaving.

Dept, of International & Public Relations, ERASMUS Office, Dr. E. Durie HAROKOPIO UNIVERSITY (G KALLITH01)

El. Venizelou Ave,, 70 GR – 176 76 KALLITHEA (ATHENS)

Contact: edurie@hua.gr tel.: + 30 210 9549 330 - fax: +30 210 9577 050

Name of Host University :
ERASMUS ID CODE :
IT IS HEREBY CERTIFIED THAT:
Mr./Ms
Date of birth (dd.mm.yy.)
From the HAROKOPIO UNIVERSITY / Charokopeio Panepistimio - G KALLITH01 (name of Home Institution)
has been an ERASMUS student at our Institution:
between and*  (day/month/year) (day/month/year)
(day/month/year) (day/month/year)
in the Faculty
Department of
* including the EILC or Language preparation Course **: Yes_□ No_□ n.a.*** □
The Transcript of Records will be (please tick one)
□ given directly to the student
□ sent to the Harokopio University ERASMUS Office, till 20 <sup>th</sup> July or
Date Stamp and Signature
Name of signatory:
Position:

<sup>\*\*</sup> National and/or Instruction Language course \*\*\* n.a. Not applicable (the student did not attend such a course)