

## ERASMUS+ Staff Mobility Certificate of Attendance

Home University	Host University
ERASMUS Code: TR ISTANBU 21	ERASMUS Code:
Name of Institution: Yeditepe University	Name of Institution:
Address: Yeditepe University International Exchange and Cooperation Office, 26 Ağustos Yerleşimi Kayışdağı Cad. 34755 Ataşehir Istanbul- TURKEY <u>erasmus@yeditepe.edu.tr</u>	Address:

We hereby confirm that Ms / Mr

.....

has performed a staff mobility within the framework of

□ Erasmus Teaching Mobility

□ Erasmus Training Mobility

from ...... / ...... / ......

to ...... / ...... / ......

Authorized person at the host institution:

Name: .....

Function: .....

Date:

Signature:

Institution Stamp:

The participant needs to send this form to the International Exchange and Cooperation Office at Yeditepe University via email or in person.

This document must be signed the participants end of mobility.