**Erasmus+ - FAMES - Erasmus Belgica**

**CERTIFICATE OF ARRIVAL AND DEPARTURE**

**Erasmus 2025 – 2026**

**Student family name and first name : ……………………………………………………………**

**Home Institution :** ……………………………………………………………………………………

**Receiving Institution :** ……………………………………… **Country :** …………………………

**Duration :** ………… days or weeks - **Virtual mobility**: before - during – after the stay

**Period of study : from** ………..…….. **to** …….……..…

**Arrival form**

We confirm that the above mentioned student has arrived at our institution

on (day/month/year) and will study in our faculty of ………………….

Signature : Stamp :

Name :

Position :

Date : ……………………………………………………..

**Departure form**

We confirm that the above mentioned student is leaving our institution on ……………………………………………………(day/month/year).

Signature : Stamp :

Name :

Position :

Date\* : …………………………………………………….

\* The date of signature should not be before the date of departure