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| ***ERASMUS+ (STA/STAT)***  ***Letter of confirmation for Erasmus+ Teaching /Training Staff Mobility***  *We hereby confirm that the below mentioned teacher from* ***University of Ljubljana*** *(****SI LJUBLJA 01****), successfully accomplished the Erasmus Teaching (and Training) Staff Mobility* | | | | | | | | |
|  | | | | | | | | | | |
| *Teacher completed* | STA mobility (Teaching)  STAT mobility (Teaching and Training) | | | | | | | | | |
|  |  | | | | | | | | | |
| *Teacher’s name and surname* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
|  |  | | | | | | | | | |
| *Name and address of host institution* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
| *E-mail of contact person at host institution* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
| *Erasmus code of host institution* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
|  |  | | | | | | | | | |
| *Dates of mobility period* | *from:* \_\_\_\_\_\_\_\_\_\_\_\_\_ | | | *till:* | | | \_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
|  | *total:* | | | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *days (excluding travel)* | | | |
|  |  | | | | | |  | | | |
| *Number of lecture hours*  *(at least 8 for STA / 4 for STAT per week)* | | | | | | *total:* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*hours (physical mobility)* | | | |
|  | | | | | | |  | | | |
| *Dates of virtual mobility period ( if applicable)* | *from:* \_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | *till:* | | \_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| *Mobility was held on line (virtual mobility)* | NO | | YES (plese specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | |
|  |  | | | | | | | | | |
| *Teaching activities performed* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
| *Training activities (if applicable)* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
| *Gained experiences during the training* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
| *Level of students* | First Cycle  Second Cycle  Third Cycle  Short Cycle | | | | | | | | | |
|  |  | | | | | | | | | |
| ***Confirmation of the host institution*** | | | | | | | | | | |
| *Name of responsible person* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | *signature* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| *Position of responsible person* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | *date* \_\_\_\_\_\_\_\_\_\_\_\_\_ *stamp* | | | |