**CONFIRMATION OF STAY**

*This certificate should be completed by a authorized officer of the host university*

|  |  |
| --- | --- |
| We hereby confirm that |  |
| Name of the student: |  |

Of Tarsus University TR MERSIN05 has completed first term of their student mobility under the scope of **Erasmus+ student mobility for studies** *(please indicate)* at

|  |  |  |  |
| --- | --- | --- | --- |
|  | *(name of the host institution)*  |  | *(Erasmus code)* |

between the dates of

|  |  |  |  |
| --- | --- | --- | --- |
| From |  | To |  |
|  | ( day / month / year )  |  | ( day / month / year ) |

The student will complete the following semester at the host institution with 0 (zero) Erasmus grant provided by Tarsus University until the end of the related Erasmus Project deadline.

|  |  |
| --- | --- |
| Name of the signatory: |  |
| Signature/Stamp: |  |
| Date: |  |

*Please bring/send original document to Tarsus Uni. Erasmus Office within 15 days upon your return*

Tarsus University Rectorate, Office of International Relations, Erasmus Office. Adress: Takbaş Mahallesi Kartaltepe Sokak 33400 Tarsus / MERSİN/ TÜRKİYE Tel : +90(324) 600 00 33 Extentioni:88074, erasmus@tarsus.edu.tr