ERASMUS+ KA1
ERASMUS MOBILITY CERTIFICATE
Academic Year: 20….. – 20…..

This is to certify that the following student has completed his/her Erasmus+ Traineeship Mobility:

Surname: ……..

Name: ……..

Host Organization: ……

Sending University: American University of Cyprus (AUCY)

Host Department: ……..

Mobility Period: ……

Date: …… **Signature: ……..**

Name and Position of Responsible Person at Host Organization:

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