ERASMUS+ PROGRAMME
STUDENT MOBILITY FOR TRAINEESHIP
20..-20.. Academic Year

CERTIFICATE OF ATTENDANCE

This is to confirm that

Mr. / Ms. ……

from **TED UNIVERSITY (TR ANKARA18)**

has completed his/her traineeship under the Erasmus+ Programme

between **DD/MM/YYYY** and **DD/MM/YYYY**.

Name of the Host Institution:

Address:

Responsible Person at the Hosting Institution

Name/Surname:

Position:

Date and Place:

Signature:

STAMP

RESTRICTED