



Certificate of Attendance

This is to confirm that the student named hereunder has carried out a mobility at our institution/organization as follows:

Name and Surname of Student:	Name of the Receiving Institution/Organisation:

Actual Start and End Dates of the Mobility (day, month, year):						
		From (first day at the host institution; e.g. orientation day, first lecture)	To (last day at the host institution; e.g. last exam)			
a)	Physical Mobility (the student was at the receiving country)					
b)	Virtual Mobility (only if applicable: if the student was not at the receiving country and thus followed classes remotely)					

Academic activities were delivered:						
Face to Face	Both Online and Face to Face \Box	Online				

Name and surname of the signatory at the receiving institution/organization:	Signature and stamp of the institution/organization:	Date:
Any additional comments:		

This document is to be returned to the International Office at the University of Malta by email at erasmus@um.edu.mt