**Erasmus+ Certificate of Attendance (2019/20)**

Name of the host Institution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**IT IS HEREBY CERTIFIED THAT:**

Mr./Ms.(name of student) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (NIF or NIE\_\_\_\_\_\_\_\_\_\_\_\_)

from the University of Cadiz, Spain (E CADIZ01)

has been an ERASMUS+ student at our institution: (Name of the institution and Erasmus Code)

between \_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_ and \_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_(\*)

day month year day month year

The language of instruction was \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, official language of the country of the host institution (Yes/No) \_\_\_\_\_\_\_\_\_\_ and the student followed a preparatory language course in the host institution (Yes/No) \_\_\_\_\_\_\_\_\_\_ If “yes”, which language? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

in the Department(s)/ Faculty of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date** (\*) **Stamp and Signature**

(\*) The date of signature should not be before the date of departure.

Name of the signatory: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Function: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The original one has to be handed to the International Office of the UCA by the student after her/his arrival in Spain**: Oficina de Relaciones Internacionales

Universidad de Cádiz

Edificio Hospital Real

Plaza FallaI nº 8

E-11003 Cádiz, Spain

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