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## ERASMUS+ PROGRAMME - STA (Staff Mobility for Teaching)

Academic Year .....

### Certificate of Attendance

The present document shall be completed by the responsible person at the International Office / Erasmus+ Office of the Host institution.

I hereby confirm that Mr / Mrs .....  
(Family name, First name)

Lecturer of the HAWK Hochschule Hildesheim/Holzminden/Göttingen [D HILDESH02] , spent his / her period of teaching

from ..... to .....  
(dd.mm.yyyy) (dd.mm.yyyy)

at .....  
(Name of Host Institution)

ERASMUS+ Code: .....

Faculty / Department: .....

Teaching assignment, number of days: .....

Number of teaching hours: .....

Number of travel days (without teaching): .....

Date: .....

Place: .....

Name and status: .....

Signature / Stamp: .....