

Erasmus+ Certificate of Arrival

Sending Institution: Georg-August-Universität Göttingen

Student's Full Name: _____

Date of Birth: _____

We confirm that the above mentioned student has enrolled as a full time student at our institution within the Erasmus+ programme

on (DD/MM/YYYY) _____

Host Institution: _____

Name: _____

Function: _____

Signature: _____

Date: _____

Stamp: _____

This confirmation has to be returned by the student to the International Office (Göttingen International) at Göttingen University at the begin of the stay abroad.