



## ERASMUS TRAINEESHIP STATEMENT

**Section 1:** upon arrival, however no later than 5 th days after your arrival, fill Section 1 signed and stamped by host Institution/Enterprise and send it to the International Office of Università degli Studi del Sannio.

**Completed form should sent to: [erasmus@unisannio.it](mailto:erasmus@unisannio.it)**

**Section 2:** at the end of your ERASMUS PERIOD, fill Section 2 signed and stamped by the host Institution/Enterprise and send it to the International Office of Università degli Studi del Sannio.

Host Institution/Enterprise: \_\_\_\_\_

### Section 1 CONFIRMATION OF ARRIVAL

I confirm that Mr./Mrs. \_\_\_\_\_  
\_\_\_\_\_ (name and surname)

coming from the **Università degli Studi del Sannio** – Erasmus code: **I BENEVEN02**, arrived at our

Institution/Enterprise on \_\_\_\_/\_\_\_\_/\_\_\_\_ (date – dd/mm/yyyy).

Name of the Host Institution Responsible: \_\_\_\_\_

Position of the Host Institution Responsible : \_\_\_\_\_

stamp:

Signature of the Host Institution Responsible : \_\_\_\_\_

### Section 2 CONFIRMATION OF DEPARTURE

I confirm that Mr./Mrs. \_\_\_\_\_ (name and surname),

stayed at our Institution/Enterprise until \_\_\_\_/\_\_\_\_/\_\_\_\_ (date –  
dd/mm/yyyy).

Name of the Host Institution Responsible: \_\_\_\_\_

Position of the Host Institution Responsible : \_\_\_\_\_

stamp:

Signature of the Host Institution Responsible : \_\_\_\_\_