**ERASMUS+ PROGRAMME – STUDENT MOBILITY FOR STUDY**

**CERTIFICATE OF DEPARTURE**

*(To be completed by the host Institution at the end of the study period)*

We hereby confirm that

|  |
| --- |
| **Name of student:** **Date of birth:** |
| **Sending institution:** International Business School, Bulgaria BG BOTEVGR02  |

has accomplished an Erasmus+ study period

|  |  |
| --- | --- |
| **from (day/month/year)** | **to (day/month/year)** |
|  **daily hours** |  **credits** |
| **Host institution name:** | **Erasmus+ code:** |
| **Name and function of the signatory:** |

 **Stamp of host institution:**

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\* The student (or the host Institution) must return this form to the International Office at International Business School, Bulgaria. You may scan it and send it as a PDF file by e-mail to: erasmus@ibsedu.bg