



Erasmus+ Certificate of Arrival

Sending Institution: Georg-August-Universität Göttingen

Student's Full Name:

Date of Birth:

We confirm that the above mentioned student started her/his internship in our institution/company 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 the Göttingen University within the first week of the internship.