**CONFIRMATION OF ERASMUS+ STAFF MOBILITY**

**STAFF ID**

**NAME:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SENDING INSTITUTION:** Instituto Politécnico de Castelo Branco – P CASTELO01

**COUNTRY:** Portugal

**RECEIVING INSTITUTION**

**NAME:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**COUNTRY:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MOBILITY PERIOD**

|  |  |
| --- | --- |
| **ARRIVAL:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_\_\_\_\_ | **DEPARTURE:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_\_\_\_\_ |

**TOTAL NUMBER OF TEACHING HOURS[[1]](#footnote-1):** \_\_\_\_\_

|  |  |
| --- | --- |
| **NAME OF SIGNATORY:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **STAMP AND SIGNATURE** |
| **FUNCTION:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| **DATE:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_\_\_\_\_ |

1. For Teaching Staff Mobility only (minimum 8 hours) [↑](#footnote-ref-1)