# *(Contacts and logo of the receiving institution)*

# ERASMUS+ TEACHING STAFF MOBILITY

# 20…/20…

# CONFIRMATION

*dd/mm/yyyy*

We hereby confirm that

## \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(lecturer’s, surname)*

from Vilniaus kolegija / University of Applied Sciences **(LT VILNIUS10)**

has been visiting

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(host institution, faculty, Erasmus code)*

from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

 *(dd/mm/yyyy) (dd/mm/yyyy)*

within the framework of Erasmus+ Teaching Programme

and has given hours of lectures on the subject:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Position: (Signature) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

 *(Name, surname)*