|  |  |  |
| --- | --- | --- |
|  | **uni1** |  |
| ***ERASMUS+ (STA/STAT)******Letter of confirmation for Erasmus+ Teaching /Training Staff Mobility****We hereby confirm that the below mentioned teacher from* ***University of Ljubljana*** *(Erasmus code:****SI LJUBLJA 01****), successfully accomplished the Erasmus Teaching (and Training) Staff Mobility* |
|  |
| *Teacher completed* | [ ]  STA mobility (Teaching) [ ]  STAT mobility (Teaching and Training) |
|  |  |
| *Teacher’s name and surname* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |
| *Name and address of host institution* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| *E-mail of contact person at host institution* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| *Erasmus code of host institution* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |
| *Dates of mobility period* | *from:* \_\_\_\_\_\_\_\_\_\_\_\_\_ | *till:* | \_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | *total:*  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *days (excluding travel)* |
|  |  |  |
| *Number of lecture hours* *(at least 8 for STA / 4 for STAT per week)* | *total:* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*hours (physical mobility)* |
|  |  |
| *Dates of virtual mobility period ( if applicable)* | *from:* \_\_\_\_\_\_\_\_\_\_\_\_\_ | *till:* | \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| *Mobility was held on line (virtual mobility)* | [ ]  NO | [ ]  YES (plese specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |
| *Teaching activities performed* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| *Training activities (if applicable)* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| *Gained experiences during the training* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| *Level of students* | [ ]  First Cycle [ ]  Second Cycle [ ]  Third Cycle [ ]  Short Cycle |
|  |  |
| ***Confirmation of the host institution*** |
| *Name of responsible person* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | *signature* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| *Position of responsible person* | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | *date* \_\_\_\_\_\_\_\_\_\_\_\_\_ *stamp*  |