

**ATTENDANCE CERTIFICATE**

**STAFF MOBILITY FOR TEACHING AND TRAINING**

### It is hereby certified that

### *(participant’s name, surname)*

### from Daugavpils University (LV DAUGAVP01), Latvia has participated in European Union *Erasmus+* programme at

###

###  *(full legal name of the host institution, Erasmus code, country)*

### from dd/mm/yyyy until dd/mm/yyyy

and has delivered lectures (4 academic hours) and performed staff training mobility activities according to the agreed programme before the mobility.

Mobility type: [ ]  Physical [ ] Virtual [ ]  Blended

Virtual mobility period from dd/mm/yyyy until dd/mm/yyyy

Date/s or period of virtual component (*(if applicable)*:

**from dd/mm/yyyy until dd/mm/yyyy**

Name, surname of signatory: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Date:

Stamp: