



TRANSBORDER MOBILITY PROGRAMME CEI IBERUS

CERTIFICATE OF MOBILITY

ACADEMIC YEAR 2012-2013

STUDENTS

Name of the host Institution: _____

IT IS HEREBY CERTIFIED THAT:

Mr./Ms. _____ from the
UNIVERSIDAD DE _____

(name of the home Institution)

has been an international student at our Institution:

between _____, _____, _____ and _____, _____, _____
day month year day month year

in the Department(s)/ Faculty of: _____

Date

Stamp and Signature

Name of the signatory: _____

Function: _____

To be sent at the end of your stay to:

(Datos de cada Universidad participante)

Only original certificates will be accepted at the University. No photocopies or amended/deleted certificates will be accepted. The issuing date of this certificate should not be previous to the end of the student's studying period in any case.