## Annex V

# Certificate of Attendance

It Is Hereby Certified that:

Mr. / Mrs. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

from the *Universitat de les Illes Balears – E PALMA01*

performed the teaching assignment for \_\_\_ teaching hours and the training activitiesspecified under the ERASMUS + programme at (*Host institution*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Country \_\_\_\_\_\_\_\_\_\_\_\_\_ between \_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_ and \_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_

Signature

Date: \_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_

|  |  |
| --- | --- |
| Name of the signatory: |  |
| Function: |  |

***This certificate must be signed AFTER the ending of stay. Therefore, the date of the signature should be either the LAST DAY OF THE STAY OR LATER.***