**CERTIFICATE OF ARRIVAL**

This certificate should be completed upon student’s arrival by an authorized officer of the host university.

 **…………… Academic Year …………. Semester**

We hereby confirm that **«FIRSTNAME»** **«LASTNAME»**, from Akdeniz University (TR ANTALYA01) is enrolled as an Erasmus Student **«ACTIVITY\_START\_DATE»** to **«ACTIVITY\_END\_DATE»** at the Department of «DEPARTMENT\_LABEL» and the Faculty of «FACULTY\_LABEL» in the «HOST UNIVERSITY\_LABEL».

Name and function of the signatory:

Date:

Stamp & Signature :

Please send this document to erasmuska107@akdeniz.edu.tr within 15 days after arrival at the host university.

**--------------------------------------------------------------------------------**

**CERTIFICATE OF DEPARTURE**

This certificate should be completed upon student’s departure by an authorized officer of the host university.

 **…………… Academic Year …………. Semester**

We hereby confirm that **«FIRSTNAME»** **«LASTNAME»**, from Akdeniz University (TR ANTALYA01) is has completed her/his studies as an Erasmus Student **«ACTIVITY\_START\_DATE»** to **«ACTIVITY\_END\_DATE»** at the Department of «DEPARTMENT\_LABEL» and the Faculty of «FACULTY\_LABEL» in the «HOST UNIVERSITY\_LABEL».

Name and function of the signatory:

Date:

Stamp & Signature :

Please bring/send original document to Akdeniz University International Relations Office within 15 days upon you return.