



Name of the host Institution/organization: \_\_\_\_\_

**IT IS HEREBY CERTIFIED THAT:**

Mr./Ms. \_\_\_\_\_

From the \_\_\_\_\_ University of Zaragoza (Spain) \_\_\_\_\_

has undertaken an ERASMUS staff training mobility at our Institution/organization:

between \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ and \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
day month year day month year

Number of training hours \_\_\_\_\_

In the Department(s)/Faculty/Unit of: \_\_\_\_\_

\_\_\_\_\_  
Date\* (Please read the note below)

\_\_\_\_\_  
Stamp and Signature

Name of the signatory: \_\_\_\_\_

Function: \_\_\_\_\_

To be sent at the end of your stay to:

Universidad de Zaragoza – Sección Relaciones Internacionales  
C/ Pedro Cerbuna, 12 – Edificio Interfacultades 2ª planta – E 50009 Zaragoza  
(SPAIN)

*\* Only **original certificates** will be accepted. **Photocopies or amended/deleted certificates** will not be accepted. The **issuing date** of this certificate should not be previous to the end of the staff mobility period in any case.*

*\* Solamente se admitirán certificados originales sin enmiendas ni tachaduras. La fecha de emisión del certificado debe ser igual o posterior a la fecha de finalización de la estancia.*