



Name of the host Institution: _____

IT IS HEREBY CERTIFIED THAT:

Mr./Ms. _____

From the _____ **University of Zaragoza (Spain)** _____

has spent a ERASMUS staff teaching exchange at our Institution:

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

Number of teaching 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 at the "Sección de Relaciones Internacionales" at the University of Zaragoza. No *photocopies or amended/deleted certificates* will be accepted. The *issuing date* of this certificate should not be previous to the end of the staff period in any case.**

**** Solamente se admitirán certificados originales sin enmiendas ni tachaduras. La fecha de emisión del certificado debe de ser igual o posterior a la fecha final de estancia. El número de horas de enseñanza no debe ser inferior a **8 horas** por semana o periodo inferior.**