



UNIVERSITÄT  
DES  
SAARLANDES

## Certificate of ERASMUS+ placements

### Confirmation of stay

Dezernat IB / International Office

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[www.uni-saarland.de](http://www.uni-saarland.de)

[www.uni-saarland.de/erasmus-praktikum](http://www.uni-saarland.de/erasmus-praktikum)

Name and surname

of the Erasmus+ student:

\_\_\_\_\_

Please send back to

Home University

\_\_\_\_\_ Universität des Saarlandes \_\_\_\_\_

[erasmuspraktikum@uni-saarland.de](mailto:erasmuspraktikum@uni-saarland.de)

Host institution

\_\_\_\_\_

First day of internship:

\_\_\_\_/\_\_\_\_/\_\_\_\_

Did the internship start in home office? ☐ No

☐ Yes, in (please specify country): \_\_\_\_\_

First day in the host country: \_\_\_\_/\_\_\_\_/\_\_\_\_

Upon arrival, did you spend some time in quarantine? ☐ No

☐ Yes, from \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Last day of internship:

\_\_\_\_/\_\_\_\_/\_\_\_\_

Day of departure:

\_\_\_\_/\_\_\_\_/\_\_\_\_

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To be filled in by the host institution

Name and position  
of the signatory:

\_\_\_\_\_

Date and Signature:

\_\_\_\_\_

Official stamp of the host institution: