|  |  |  |
| --- | --- | --- |
|  | **Confirmation form** *Campus Mundi Programme Student Mobility for Studies* | M:\Campus_Mundi\05_Kommunikacio\Arculat\Logo_hatalyos\Campus_Mundi_2.jpg |

|  |  |  |  |
| --- | --- | --- | --- |
|  | *2020/2021* |  | *2021/2022* |

|  |  |
| --- | --- |
| Name of the exchange student |   |
| Field of study |  |
| Home University |  |
| Host University |  |
| Faculty/Department |  |

**Confirmation of arrival**

We confirm that the above mentioned student has arrived at our University and has started his/her studies

|  |  |
| --- | --- |
| on *(dd/mm/yyyy)* | \_\_\_ /\_\_\_\_ /\_\_\_\_\_\_ as on Campus (offline) *OR* virtual semester |
| Due to the COVID 19 pandemic, our University offers studies and activities for incoming students as follows: | - on Campus (offline): from \_\_\_ /\_\_\_\_ /\_\_\_\_ to \_\_\_ /\_\_\_\_ /\_\_\_\_\_- virtual period (on-site): from \_\_\_ /\_\_\_\_ /\_\_\_\_\_ to \_\_\_\_ /\_\_\_\_ /\_\_\_\_\_\_- virtual period (from home): from \_\_\_ /\_\_\_\_ /\_\_\_\_\_ to \_\_\_\_ /\_\_\_\_ /\_\_\_\_\_\_ |
| Responsible person at the Host University | Name: |
| Position: |
| Email address: |
| Date |  | Stamp |
| Signature |  |

*(The student has to upload this document to* [*mundi.scholarship.hu*](http://www.scholarship.hu) *within 30 days after the arrival.)*

**Confirmation of departure**

We confirm that the above mentioned student has completed his/her studies and is leaving our University

|  |  |
| --- | --- |
| on *(dd/mm/yyyy)**– the date of the last examination* |  |
| the academic Transcript of Records |  is enclosed |
|  will be sent directly to the International Office of the Home University |
| Due to the COVID 19 pandemic, our University offered studies and activities for incoming students as follows: | - on Campus (offline): from \_\_\_ /\_\_\_\_ /\_\_\_\_ to \_\_\_ /\_\_\_\_ /\_\_\_\_\_- virtual period (on-site): from \_\_\_ /\_\_\_\_ /\_\_\_\_\_ to \_\_\_\_ /\_\_\_\_ /\_\_\_\_\_\_- virtual period (from home): from \_\_\_ /\_\_\_\_ /\_\_\_\_\_ to \_\_\_\_ /\_\_\_\_ /\_\_\_\_\_\_ |
| Responsible person at the Host University | Name: |
| Position: |
| Email address: |
| Date |  | Stamp |
| Signature |  |

*(The student has to upload this document to* [*mundi.scholarship.hu*](http://www.scholarship.hu) *within 30 days after the departure.)*