



CERTIFICATE OF ARRIVAL

VERY IMPORTANT:

to be completed and signed by the host institution at the beginning of the mobility of the student

Name of the host Institution: _____

IT IS HEREBY CERTIFIED THAT:

Mr./ Mrs.: _____

I.D.: _____

From the University of the Basque Country (E BILBAO01) has started her/his mobility on
(day)_____ (month)_____ (year)_____

The chosen learning modality is indicated below:

- | |
|--|
| <input type="checkbox"/> PHYSICAL MOBILITY (face to face +/- or on line classes on site, the student is physically in the HOST Country) |
| <input type="checkbox"/> BLENDED MOBILITY (virtual from home country + possible physical component) |

In the Department(s)/Faculty of: _____

Date _____
This date mustn't be previous to the date of arrival

Stamp and Signature _____

Name of the signatory: _____

Function: _____

Important: Amendments or deletions will not be admitted on this form.

This certificate must be sent by the student, at the beginning of his/her stay, to: