



person of the partner institution

ERASMUS + Letter of Confirmation for

Teaching Assignment (STA)
Academic Year 2016/2017

To whom it may concern

Name of host institution	
ERASMUS Code (if applicable)	
I hereby confirm that	from
(home institution) State Higher Vocational School in Racibórz (PL RACIBOR01) has taken	
part in the framework of the ERASMUS + Programme in	our institution.
Duration of stay (in days): from:until:	
Number of teaching hours (TA) :	
Date: Place:	
Name and Signature of the authorized	Stamp