**Transcript of Completed Short Study Programme**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Student** | *Last name(s)* | *First name(s)* | | *Nationality* | *Sex (M/F)* | *Date of birth* | *Field of study* |
|  |  | |  |  |  |  |
| **Sending University** | *Name, faculty* | | *Contact person name[[1]](#endnote-1); position* | | | *Contact person email; phone* | |
|  | |  | | |  | |
| **Receiving Institution/Organization** | *Name, department* | | *Contact person name[[2]](#endnote-2); position* | | | *Contact person email; phone* | |
|  | |  | | |  | |

**After the mobility**

|  |
| --- |
| ***Certificate issued by the Receiving Institution/Organisation*** |
| **Start date and end date of the completed short study:**  from [day/month/year] …………………. to [day/month/year] ………………..,  **Duration: ----- days**  **Number of working hours per week:** …….. hours  **Working language:** |
| **Detailed programme of the short study period including tasks carried out by the student:** |
| **Knowledge, skills (intellectual and practical) and competences acquired (achieved Learning Outcomes):** |
| **Evaluation of the student:** |
| **Hereby I certify, that the above mentioned student has succesfully completed the described Short Term Study Programme.**  Date: |
| **Name and signature of the Supervisor at the Receiving** **Institution/Organisation**3**:**  **Stamp** |

**The document is valid only if it is completely filled out, as well as signed and stamped or signed and headed.**

1. **Contact person at the sending institution**: this person was responsible for signing the professional recommendation letter, may be the supervisor or head of the department/institute at the sending university. [↑](#endnote-ref-1)
2. **Contact person at the receiving institution**: this person is responsible for supervising the student during the Short Term Study Programme and signing the Transcript of Completed Short Study Programme document, amending it if needed.

   3 **Supervisor at the Receiving** **Institution/Organisation**:. The name and email of the Supervisor must be filled in only in case it differs from that of the Contact person mentioned at the top of the document. [↑](#endnote-ref-2)