
# ERASMUS+

**20…/20…**

## Confirmation

**This is to confirm that the student of the University of Lodz (PL LODZ 01)**

(first name and surname of student)

(date of his/her birth)

**was following a course of studies at**

 (name of receiving university)

**from** **to**

 (day, month, year) (day, month, year)

Date Signature of IRO/ERASMUS Officer

 at the receiving university

 Stamp of IRO