



# CONFIRMATION

ERASMUS+ 2016/2017

## To whom it may concern

We herewith confirm that Ms/ Mr .....  
(title and name)

has taught ... hours in the framework of the ERASMUS+ Staff Mobility for Teaching bilateral agreement signed between

**CARDINAL STEFAN WYSZYŃSKI UNIVERSITY IN WARSAW (PL WARSZAW07)**  
(name of sending institution)

and

.....  
(name of receiving institution)

Duration of stay: from ..... to .....  
(dd/mm/yy) (dd/mm/yy)

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(Signature and stamp of the hosting institution)