

To the University of Trieste  
International Mobility Office  
34127 I - TRIESTE  
Tel: +39 040 558 2994  
E-mail: outgoing.students@amm.units.it

### LETTER OF DEPARTURE

Enter the ending date of the activities

We confirm that (surname/name)\_\_\_\_\_from the University  
of Trieste finished his/her Overseas **physical mobility** (study exchange) at (name of the Host  
University)\_\_\_\_\_  
on (ending date)\_\_\_\_\_for\_\_\_\_\_ months  
in the academic year 2024/2025.

Date

**Signature and seal of the International Office  
of the Receiving Institution**

\_\_\_\_\_

Please note:

If the signature and seal are missing, this document is not valid.

This certificate cannot be signed before the date of departure.