

To the University of Trieste  
International Mobility Office  
34127 I - TRIESTE  
Tel: +39 040 558 2991  
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 Erasmus + Key Action 1 **physical mobility** (study exchange) at (name of the Host University) \_\_\_\_\_ on (ending date) \_\_\_\_\_ for \_\_\_\_\_ months in the academic year 2022/2023.

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.