

ERASMUS Student Mobility

Name of the student:	
From:	P LISBOA03 - Universidade Nova de Lisboa
To:	

Arrival	
I certify that the student has been registered at the host University on	<div style="border: 1px solid black; padding: 5px; display: inline-block;"> ___/___/___ </div>
Name of the Signatory:	
Function:	
_____	_____
Date	Institutional Stamp & Signature

Departure	
I certify that the student has completed his/her study programme on	<div style="border: 1px solid black; padding: 5px; display: inline-block;"> ___/___/___ </div>
Name of the Signatory:	
Function:	
_____	_____
Date	Institutional Stamp & Signature

To be handed directly to the student or sent by post to:

Reitoria da Universidade Nova de Lisboa
 International Relations Office
 Campus de Campolide
 1099-085 Lisboa – Portugal