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| **Certificate of Arrival / Departure**  **PROMOS**  Diese Bescheinigung gilt als Nachweis über Ihre Aufenthaltszeiten an der Gastinstitution.  This certificate is required as proof the duration of a PROMOS funded stay. |

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| **Personal Details** |  |
| Name, First Name |  |
| Academic Year |  |
|  |  |
| **Home Institution** | Westfälische Wilhelms-Universität |
| Address | International Office, Schlossplatz 3, D-48149 Münster / Germany |
| Email | promos.io@wwu.de |

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| Host Institution | | | | | | | | | | | |  | |
| Host Institution – City / Country | | | | | | | | | | | |  | |
| Name of Signatory | | | | | | | | | | | |  | |
| Function | | | | | | | | | | | |  | |
| **Arrival Date**  Day.Month.Year | | | | | | | | | | | |  | |
|  |  |  | **.** |  |  | **.** | **2** | **0** |  |  |  |
|  | | | | | | | | | | | | Signature of the host institution | Date and Stamp |
|  | | | | | | | | | | | |  | |
| Name of Signatory | | | | | | | | | | | |  | |
| Function | | | | | | | | | | | |  | |
| **Departure Date**  Day. Month.Year | | | | | | | | | | | |  | |
|  |  |  | **.** |  |  | **.** | **2** | **0** |  |  |  |
|  | | | | | | | | | | | | Signature of the host institution | Date and Stamp |