



Program, cycle and year.....

Academic year

Statement

Name:.....

Surname:.....

1. Information whether you have previously participated in the Erasmus+ program (studies/internship)

YES / NO

2. If yes, when did you participate:

Dates: Total number of months

Sending institution:.....

Receiving institution (name, country):

The acquired number of ECTS points:

Warsaw, date.....Signature.....