



## CERTIFICATE OF ARRIVAL

### MOBILITY FOR TEACHING / TRAINING

#### RECEIVING INSTITUTION

Name of the received Institution	
Address	
City/Country	
e-mail	
Phone	

#### THE BENEFICIARY

Full Name	
ID Card-Passport	
Date of Birth	
Sending Institution	ESCUELA DE ARTE DE GRANADA
Address/City/Country	CALLE GRACIA, N°4. 18002/ GRANADA/ SPAIN
Erasmus Code	E GRANADA29

IT IS HEREBY CERTIFIED THAT\*:

He/She started his/her Erasmus+ mobility period at our institution on (day/month/year):

Name of Signatory: Function: Signature:         Date and place:	Stamp:
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**IMPORTANT NOTE\*:** Only original certificates will be accepted at the EAG. No photocopies or amended/deleted certificates will be accepted. The issuing dated of this certificate should not be previous to the end of the mobility period in any case.

**To be returned to EAG INTERNATIONAL OFFICE:** [erasmus.escueladeartedegranada@gmail.com](mailto:erasmus.escueladeartedegranada@gmail.com)