

**Certificate of Departure**

**Student’s Name :** .............................................................................................................

**Field of Study** **:** ..............................................................................................................

**Name of the Home Institution :** Ömer Halisdemir University

**Erasmus Code :** TR NIGDE01

**Name of the Host Institution :** .........................................................................................

**Erasmus Code** **:** ..............................................................................................................

**Confirmation of Departure:**

**We hereby confirm that above mentioned student studied at our Institution until:**

|  |  |  |
| --- | --- | --- |
| **Day** | **Month** | **Year** |
|  |  |  |

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature and Stamp**

**Institutional Coordinator of the Host Institution**

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The student must send this document to Omer Halisdemir University in **5 (five) days** after his/her departure.

(Bu form karşı kurumdan ayrılmadan önce onaylatılıp 5 gün içinde Ömer Halisdemir Üniversitesine gönderilmelidir)