



## Certificate of Departure

**Student's Name :** .....

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

**Name of the Home Institution :** Nigde 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**

The student must send this document to Nigde University in **5 (five) days** after his/her departure.  
(Bu form karşı kurumdan ayrılmadan önce onaylatılıp 5 gün içinde Niğde Üniversitesine gönderilmelidir)