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**STATEMENT OF HOST INSTITUTION**

**Erasmus+ Programme**

**Academic year 20\_\_/20\_\_**

**Staff member data** (please underline)

|  |  |
| --- | --- |
| Name: |  |
| Surname: |  |
| Date of Birth: |  |
| Home Institution:Erasmus ID code(eg. B BRUXEL01): |  |

The undersigned representative of the Host Institution hereby confirms that the above mentioned staff member has realized Erasmus+ mobility period at host Institution:

**Confirmation of arrival and departure**

|  |  |
| --- | --- |
| **Date of Arrival:** | XX.XX.20XX |
| **Date of Departure:** | XX.XX.20XX |
| **Type of Mobility:** | 1) Teaching assignment (8 hours per week)2) Staff training |

|  |  |
| --- | --- |
| Name, Surname, Position of the host HEI RepresentativeKristina Črnjar, Ph.D., Assistant Professor, Vice Dean for International AffairsSignature:Date: | Stamp of Host Institution |

**Host Institution data**

|  |  |
| --- | --- |
| Host Institution:Erasmus ID code(eg. BE Bruxelles01): | Faculty of Tourism and Hospitality Management, University of Rijeka HR RIJEKA01 |
| Address, City, Country:  | Primorska 42, p.p. 97, HR – 51410 Opatija |
| Host faculty, department, Unit | / |
| Contact person\*Name, Surname, Title, PositionE-mail address | Kristina Črnjar, Ph.D., Assistant ProfessorVice Dean for International Affairskcrnjar@fthm.hr |

* *Contact person may be professor, mentor, institutional, ECTS or Erasmus coordinator*