**ERASMUS**

Letter of Confirmation for Staff Mobility for **Teaching**

Academic Year 2025/2026

To whom it may concern

Name of host institution: …………………………………………………………………………………

I hereby confirm that Ms. / Mr. …………………………………………………………………………..

From (home institution) **Fachhochschule Salzburg**

has taught ……… hours in the framework of an Erasmus Teaching Assignment in our institution.

Duration of stay (in days): ……… (excl. …… interruption day/s),

from: ………………………………………………… until: …………………………………………….

Date ………………………. Place ……………….……

|  |  |  |
| --- | --- | --- |
|   |   |   |
| Signature of the authorized personof the partner institution |   | Stamp |

