



UNIVERSITÀ DI NAPOLI  
**L'ORIENTALE**

Ufficio Relazioni e Mobilità Internazionale

RECEIVING UNIVERSITY/ ORGANIZATION/ ENTERPRISE\_\_\_\_\_

STUDENT \_\_\_\_\_

We hereby confirm that the above-mentioned student started a mobility period in our university/organization/enterprise on ..... /..... /.....

BLENDED MOBILITY: YES/NO

VIRTUAL MOBILITY from ..... /..... /.....

PHYSICAL MOBILITY from ...../...../.....

The responsible person in the receiving organization/ enterprise (supervisor):

DATE OF ISSUE\_\_\_\_\_ NAME\_\_\_\_\_

SIGNATURE\_\_\_\_\_

STAMP

\* \* \* \* \*

RECEIVING UNIVERSITY ORGANIZATION/ ENTERPRISE\_\_\_\_\_

STUDENT \_\_\_\_\_

CONFIRMATION OF COMPLETION

We hereby confirm that the above-mentioned student completed the mobility period on .....

BLENDED MOBILITY: YES/NOX

VIRTUAL MOBILITY from ..... /..... /..... to ..... /..... /.....

PHYSICAL MOBILITY from ..... /..... /..... to ..... /..... /.....

The responsible person in the receiving University/organization/ enterprise (supervisor):

DATE OF ISSUE\_\_\_\_\_ NAME\_\_\_\_\_

SIGNATURE\_\_\_\_\_

STAMP