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| --- |
| **Letter of Acceptance** |

**This is to confirm that**

**Mr/Ms** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ from **WSB University**

(first name and surname of the student)

**Has been accepted for traineeship mobility at**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(name of the host institution/Erasmus ID Code)

**In the period**

**from** ( year/month/day) \_\_\_\_\_ - \_\_\_\_\_ -\_\_\_\_\_

**to** ( year/month/day) \_\_\_\_\_ - \_\_\_\_\_ -\_\_\_\_\_

**In case of any questions concerning this case, please contact:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name, surname and a position of a responsible person)

**E-mail address of responsible person:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_ - \_\_\_\_\_ -\_\_\_\_\_   
date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
signature and optional stamp

of the responsible person