

CERTIFICATE OF ATTENDANCE

BLENDED INTENSIVE PROGRAM (BIP)

VERY IMPORTANT:

to be completed and signed by the host institution at the end of the stay of the student

IT IS HEREBY CERTIFIED THAT:

Mr./ Mrs.: _____

I.D.: _____

From the University of the Basque Country (E BILBAO01) has been registered as an exchange student at our institution:

FROM: _____ _____ _____ **TO:** _____ _____ _____
 Day Month Year Day Month Year

Name of the host Institution: _____

Name of the BIP: _____

Date

Stamp and Signature

Name of the signatory: _____

Function: _____

*** In no case the date of issue of this certificate can be previous to the date of the end of the stay of the student at the host institution.**

This certificate must be sent by the student, at the end of his/her stay, to:
movilidad.internacional@ehu.eus and the International Relations Coordinator of your Faculty