



CERTIFICATION OF ERASMUS STUDIES ABROAD

Name of the host Institution: _____

IT IS HEREBY CERTIFIED THAT,

Mr./Ms. _____

from the Szent István University

has been a SOCRATES/ERASMUS student at our Institution:

between _____, _____, _____ and _____, _____, _____
 day month year day month year

in the Department/Faculty of _____

date

stamp and signature

Name of the signatory: _____

Function: _____

To be sent to:
Szent István University
International Relations Office
2100 Gödöllő
Páter Károly u. 1.
Hungary