

<u>Double Degree in Italian Philology and Literature with</u> <u>Goethe - Universität Frankfurt am Main</u>

Annex 3, p.1

CONFIRMATION OF ARRIVAL

Please fill in the form and send it to the International Office of Ca' Foscari University of Venice by e-mail (jointdegree@unive.it). The student has to submit the original form by hand or by registered letter to the International Office of Ca' Foscari University within 15 days from the end of the mobility period.

Academic year	Sem	ester	Matriculation number		
Student's name	Stud	ent's surname			
Field of study					
Sending institution	Università Ca' Foscari Venezia		Country <u>Italy</u>		
HOSTING INSTITUTION:					
Name and full address					
International Relations Officer – name and surname, tel., fax, e-mail					
DATE OF ARRIVAL at the hosting institution (dd/mm/yyyy):					
Stu	udent's signature	Inte	ernational Relations Officer		
	artonic orginalis		ng institution: signature and stamp		
Date (dd/mm/\\\\\\)		Date (dd/mm/y	ууу)		
Date (dd/ffiff/yyyy) _		Date (dd/mm/y	<i>yyy1</i>		



<u>Double Degree in Italian Philology and Literature with</u> <u>Goethe - Universität Frankfurt am Main</u>

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CONFIRMATION OF DEPARTURE

Please fill in the form and send it to the International Office of Ca' Foscari University of Venice by e-mail (jointdegree@unive.it). The student has to submit the original form by hand or by registered letter to the International Office of Ca' Foscari University within 15 days from the end of the mobility period.

Academic year	Sem	ester	Matriculation number		
Student's name	Stud	ent's surname			
Field of study					
Sending institution	Università Ca' Foscari Venezia		Country <u>Italy</u>		
HOSTING INSTITUTION:					
Name and full address					
International Relations Officer – name and surname, tel., fax, e-mail					
DATE OF DEPARTURE					
from the hosting in	stitution (dd/mm/yyyy):				
Stu	udent's signature		ernational Relations Officering institution: signature and stamp		
Date (dd/mm/yyyy) _		Date (dd/mm/y	уууу)		