



Università  
Ca' Foscari  
Venezia

– International Relations Office, Ca' Foscari, Dorsoduro 3246, 30123 Venice, Italy –

**Double Degree in Language Sciences with  
Goethe - Universität Frankfurt am Main**

**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	_____	Semester	_____	Matriculation number	_____
Student's name	_____	Student's surname	_____		
Field of study	_____				
Sending institution	Università Ca' Foscari Venezia		Country	Italy	

**HOSTING INSTITUTION:**

Name and full address
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International Relations Officer – name and surname, tel., fax, e-mail
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**DATE OF ARRIVAL**

**at the hosting institution (dd/mm/yyyy):**

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Student's signature	International Relations Officer of the hosting institution: signature and stamp
_____	_____
Date (dd/mm/yyyy) _____	Date (dd/mm/yyyy) _____



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**Annex 3, p.2**

**CONFIRMATION OF DEPARTURE**

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Academic year	_____	Semester	_____	Matriculation number	_____
Student's name	_____	Student's surname	_____		
Field of study	_____				
Sending institution	Università Ca' Foscari Venezia		Country	Italy	

**HOSTING INSTITUTION:**

Name and full address
_____
_____
International Relations Officer – name and surname, tel., fax, e-mail
_____
_____

**DATE OF DEPARTURE**

**from the hosting institution (dd/mm/yyyy):**

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Student's signature	International Relations Officer of the hosting institution: signature and stamp
_____	_____
Date (dd/mm/yyyy) _____	Date (dd/mm/yyyy) _____