**ERASMUS + EUROPEAN MOBILITY (ONLY EUROPE)**

**CONFIRMATION OF CONTINUATION OF STUDIES OR TRAINEESHIP/INTERNSHIP**

**ON-LINE/DISTANCE**

**This form is complementary to the** [**on-line form**](https://www.esmaker.net/nx2/s.aspx?id=a174eb4fd0bb) **that students are requested to submit, related to the continuation of studies or traineeship/internship on-line/distance.**

|  |  |
| --- | --- |
| Student First name: |  |
| Student Last name: |  |
| Email: |  |
| Host University |  |
| Country Host University |  |
| School at Jönköping University | \_\_\_\_Jönköping International Business School \_\_\_School of Engineering  \_\_\_\_School of Health and Welfare \_\_\_\_School of Education and Communication |
| Host Company (in case of traineeship/internship) |  |
| Country Host Company (in case of traineeship/internship) |  |

|  |
| --- |
| **ONLY STUDIES**  I hereby confirm that the host university will offer on-line/distance education.  The on-line distance education will be offered for the following period:  From (DD/MM/YYYY) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TO (DD/MM/YYYY)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name coordinator at the host university Signature  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Title Email  Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| **ONLY TRAINEESHIP/INTERNSHIP**  I hereby confirm that the host company will offer on-line/distance traineeship/internship.  The on-line/distance traineeship/internship will be offered for the following period:  From (DD/MM/YYYY) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TO (DD/MM/YYYY)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name contact person at the host company Signature  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Title Email  Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

The student will be requested to fill out and complete a Certificate of Attendance at the end of the mobility, even for on-line/distance options, since it is a requirement of the Erasmus + programme.

|  |
| --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Student Signature  Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

After completing this form please **save it as a pdf** and **upload** it through this link <http://educationsupport.ju.se/> select case type “outgoing exchange”.

*Scanned signatures and documents are accepted.*