**Letter of Acceptance**

This is to certify that Ms. student’s name, born on birth date, student of the Department of ……….. at Bartın University, was accepted to carry out the ERASMUS+ practical training at (name of the company).

The 3-month ERASMUS practical training will be realised in the period from ………

to ………… . During this period, he/she will be engaged in following activities in our ……… department:

* .
* .
* .

The responsible person for ERASMUS practical training within our organization will be:

Name:

Address:

Tel/ Fax:

E-mail:

Date: …………………………

The signature of the authorised person:

Position within the organisation/Title: …………………………………………..

Institutional stamp: