



DALARNA
UNIVERSITY

CONFIRMATION OF ARRIVAL
AT THE HOST INSTITUTION FOR
DALARNA UNIVERSITY OUTGOING
EXCHANGE STUDENTS

Information to the student: Please send this form to Dalarna University via e-mail as soon after arrival as possible. (ioffice@du.se)

This section is to be filled out by the student:

Family name (surname)	Given name(s)
Date of birth (year/month/day)	Email:
Duration of stay first semester:	Duration of stay second semester (if applicable):

Information to the Host Institution: Please fill in the form. The student will return it to us at Dalarna University via e-mail.

This section is to be filled out by the Host Institution:

I hereby certify that _____,
a student of Dalarna University, (*Name of the student*)

has arrived at _____
(*Name of the host institution*)

on _____
(*dd/mm/yy*)

and is registered as an Exchange Student for the 20..... – 20..... academic year.

The first semester covers the period from _____ to _____
(*dd/mm/yy*) (*dd/mm/yy*)

(If applicable)

The second semester covers the period from _____ to _____
(*dd/mm/yy*) (*dd/mm/yy*)

Signature of the Host Institution: _____

Name: _____

Position: _____ Date: _____

Institutional
stamp