

**EXTENSION OF STAY AT THE UNIVERSITY OF WARSAW**

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| Student's Name |  |
| Home University |  |
| Host University | **University of Warsaw (PL WARSZAW01)** |
| Receiving Facultyat the University of Warsaw |  |

Academic Year 2021/2022

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| Original study period: | Requested additional period: |
| From:01/10/2021 | To:11/02/2022 | From:21/02/2022 | To:08/07/2022 |

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| Student’s signature:Date: |

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| HOME INSTITUTION:We hereby confirm that the above-mentioned student is permitted to extend his/her Erasmus stay at the University of Warsaw.Signature and Seal of the Departmental and/or Institutional Erasmus Coordinator:Date: |

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| UNIVERSITY OF WARSAW:I hereby confirm that the above-mentioned student is permitted to extend his/her Erasmus stay at the University of Warsaw.Signature and Seal of the Departmental Mobility Coordinator:Date: |