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| Holder of the document |
|  |
|  1 SURNAME(S) \* |  2 FIRST NAME(S) \* |  3 ADDRESS |
| Replace with text | Replace with text | Replace with textReplace with textReplace with text |
|  4 DATE OF BIRTH |  5 NATIONALITY |
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 |  Replace with text |
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| Issuing organisation |
|  |
|  6 NAME OF THE ORGANISATION \* |  7 DOCUMENT NUMBER \* |  8 ISSUING DATE \* |
| Replace with text | Replace with text |

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 |
| Sending partner |
|  |
|  9 NAME, TYPE AND ADDRESS \* |  10 STAMP AND/OR SIGNATURE |
| Replace with textReplace with textReplace with textReplace with text |  |

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 |
|  11 SURNAME(S) AND FIRST NAME(S) OF REFERENCE PERSON/MENTOR |  12 TELEPHONE |
| Replace with text |  | Replace with text |
|  13 TITLE/POSITION |  |  14 E-MAIL |
| Replace with text |  | Replace with text |
|  |  |  |
| Host partner |
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|  15 NAME, TYPE AND ADDRESS \* |  16 STAMP AND/OR SIGNATURE |
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 |
|  17 SURNAME(S) AND FIRST NAME(S) OF REFERENCE PERSON/MENTOR |  18 TELEPHONE |
| Replace with text |  | Replace with text |
|  19 TITLE/POSITION |  |  20 E-MAIL |
| Replace with text |  | Replace with text |
| \* Headings marked with an asterisk are mandatory. |

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| Description of the Europass Mobility experience |
|  |
|  21 OBJECTIVE OF THE EUROPASS MOBILITY EXPERIENCE \* |
| Replace with text |
|  22 INITIATIVE DURING WHICH THE EUROPASS MOBILITY EXPERIENCE IS COMPLETED |
| Replace with text |
|  23 QUALIFICATION (CERTIFICATE, DIPLOMA OR DEGREE) TO WHICH THE EDUCATION OR TRAINING LEADS |
| Replace with text |
|  24 COMMUNITY OR MOBILITY PROGRAMME INVOLVED |
| Replace with text |
|  DURATION OF THE EUROPASS MOBILITY EXPERIENCE |
|  25 FROM \* |

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 |  26 TO \* |

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 |
| Skills acquired during the Europass Mobility experience |
|  |
|  27A ACTIVITIES/TASKS CARRIED OUT \* |
| Replace with text. |
|  28A JOB-RELATED SKILLS  |
| Replace with text |
|  29A LANGUAGE SKILLS (if not included under 'Job-related skills’) |
| Replace with text |
|  30A COMPUTER SKILLS (if not included under 'Job-related skills’) |
| Replace with text |
|  31A ORGANISATIONAL / MANAGERIAL SKILLS (if not included under 'Job-related skills’) |
| Replace with text |
|  32A COMMUNICATION SKILLS (if not included under 'Job-related skills’) |
| Replace with text |
|  33A OTHER SKILLS |
| Replace with text |
|  34A DATE \*  |  35A SIGNATURE OF THE REFERENCE  PERSON/MENTOR |  36A SIGNATURE OF THE HOLDER |
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| \* Headings marked with an asterisk are mandatory. |

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| Record of courses completed and individual grades / marks / credits obtained |
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|  27B STUDENT MATRICULATION NUMBER \* | Replace with text |
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| 28BCOURSE UNIT CODE [[1]](#footnote-1) | 29BTITLE OF THE COURSE UNIT \* | 30BDURATION [[2]](#footnote-2) \* | 31BLOCAL GRADE [[3]](#footnote-3) \* | 32BECTS/ECVETGRADE | 33BECTS/ECVETCREDITS [[4]](#footnote-4) |
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 |
| Add or remove lines if required |
|  34B ESSAY/REPORT/DISSERTATION |
| Replace with text |
|  35B CERTIFICATE/DIPLOMA/DEGREE AWARDED, if any |
| Replace with text |
|  36B SURNAME(S) AND FIRST NAME(S) OF MENTOR/ADMINISTRATION OFFICER |  37B SIGNATURE OF THE HOLDER |
| Replace with text |

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 |
|  38B DATE OF VALIDATION \* |
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|  39B NAME, ADDRESS AND STATUS OF THE INSTITUTION \* |  40B STAMP OR SEAL |
| Replace with textReplace with textReplace with textReplace with text |

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| \* Headings marked with an asterisk are mandatory. |

1. COURSE UNIT CODE: Refer to the ECTS information Package provided on the website of the host institution [↑](#footnote-ref-1)
2. DURATION OF COURSE UNIT: Y = 1 full academic year | 1S = 1 semester | 2S = 2 semesters | 1T = 1 term/trimester | 2T = 2 terms/trimesters [↑](#footnote-ref-2)
3. DESCRIPTION OF THE INSTITUTIONAL GRADING SYSTEM: [↑](#footnote-ref-3)
4. ECTS CREDITS: 1 full academic year = 60 credits | 1 semester = 30 credits | 1 term/trimester = 20 credits [↑](#footnote-ref-4)