Attendance Certificate

Student Mobility
Academic year 2020/2021

Sending Institution	Receiving Institution
Sciences Po Lille **9 rue Auguste Angellier** **F-59000 Lille**	

STEP 1 *

I hereby confirm,
That Ms / Mr . ……..,
Coming from Sciences Po Lille is registered to perform a mobility planned

From / / 20 to / / 20

Name and function of the authorised person at the Host Institution:

Date:

Signature: Stamp of the Host Institution:

STEP 2 **

I hereby confirm,
That Ms / Mr ……....,
Coming from Sciences Po Lille has performed a mobility

From / / 20 to / / 20

Name and function of the authorised person at the Host Institution:

Date:

Signature: Stamp of the Host Institution:

*** :** After arrival at the host institution, the student is requested to have this first part filled in by an international Officer of the Host Institution or his/her representative and send it by mail to the International Office of Sciences Po Lille.

****:** At the end of the mobility, the second part has to be filled in by the Host Institution and the student is requested to send it by mail to the International Office of Sciences Po Lille

For further information: mobilitésortante@sciencespo-lille.eu