

**Please complete the Letter of Acceptance on your official headed paper**

## **Letter of Acceptance**

This is to certify that Mr./Ms (name of the student) student of the Faculty of ..... , University of Žilina 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..... . The preparation of the adequate training placement will be done according to qualification and study profile of the student.

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: