**Staff Mobility for Teaching**

**Certificate of Teaching**

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| Name of the teaching staff member:  Sending Institution: **National and Kapodistrian University of Athens**  Erasmus Code: **G ATHINE01**  Receiving Institution:  Erasmus Code (if applicable):  Number of teaching days (min. 5 days):  From:  To:  Number of teaching hours: (min. 8 hours per week):  Level of students who attended the lecture(s): Undergraduate  Postgraduate  Doctorate  Language of instruction: |

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| Name of the signatory:  Position:  Date:  Signature: Stamp: |

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| Content of the teaching programme: |