



EXTENSION CERTIFICATE

academic year 2017/18

Ms/Mr: **Family name:**

First name:

e-mail address:

is **nominated** by the University

(ERASMUS Code of home institution (if applicable):

to additionally study at the University of Vienna (A Wien01) **as an exchange student in the summer semester 2018.**

→ To be completed by the Programme Coordinator or International Office at the HOME INSTITUTION:

Signature:.....

Name and position:.....

Date:

Stamp:

→ The extension is accepted on my part – to be completed by the ERASMUS Departmental Coordinator at the UNIVERSITY OF VIENNA:

Signature:

Name and position:

Date:

Stamp:

Please be aware that the completed version **has to be sent to** the International Office at the University of Vienna to be able to prepare your enrolment accordingly **by 31 January 2018.**

Please note:

This certificate is **not valid without the signature and the stamp** of all responsible departments.