 

**Acknowledgement of Receipt of Grant Form:**

**Staff Mobility Grant**

**Name of Staff Member:**

**Home Institution:**

**Host Institution:**

**Activity dates:**

**Duration of period to be covered by the grant (in days including travel days if applicable) :**

I acknowledge the receipt of the following Staff Mobility Grant amount funded through the Erasmus+ Programme.

Amount € Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_