



Erasmus+ Programme Letter of Confirmation (SMP)

Academic Year 2025/2026

Jniversidade de Lisboa	(P LISBOA109), carried out a period of traineeship a
	(name of the hos
institution), as an exc	change student within the Erasmus+ Programme from
/til	ll/ (filled by the host institution).
(dd/mm/yyyy)	(dd/mm/yyyy)
took successfully part of	on a traineeship work online (Note: apllies only for blended mobilities/BIP
	/till/
	(dd/mm/yyyy) (dd/mm/yyyy)
Name and status (hos	st institution):
Signature:	
Signature.	
Stamp of institution:	
Stamp of institution:	
-	(to be signed at the end of the traineeship period)
-	(to be signed at the end of the traineeship period).
Date://(dd/mm/yyyy	7)
Date://(dd/mm/yyyy	lowing information about the host institution ^(*) , to enable our
Date://	lowing information about the host institution ^(*) , to enable our European Commission:
Date://	lowing information about the host institution ^(*) , to enable our
Date://(dd/mm/yyyy Please provide the fold Erasmus+ Report to the Type of Institution (e.g. p	lowing information about the host institution ^(*) , to enable our European Commission: public, private, NGO, research centre, university):
Date://	lowing information about the host institution ^(*) , to enable our European Commission: public, private, NGO, research centre, university):
Date://	lowing information about the host institution ^(*) , to enable our European Commission: public, private, NGO, research centre, university):