

Organisation/Company

**Letter of Acceptance**  
**Academic Year 2024/25**

Name of the Host Organisation:

Address:

Tel / Fax:

E-Mail:

Web Address:

Responsible Person:

E-Mail:

This is to certify that \_\_\_\_\_ *(ονοματεπώνυμο)*

student of \_\_\_\_\_ *(Πανεπιστήμιο)*

Department \_\_\_\_\_ *(Τμήμα)*

is accepted to carry out an Erasmus+ traineeship at \_\_\_\_\_  
*(name of host organisation)*

*A short description of the traineeship in English:*

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**Working language** at the host organisation:

Second language (required):

The Erasmus+ traineeship will take place in the period **from:** \_\_\_\_\_ **to:** \_\_\_\_\_  
*(traineeship dates)*

Signature

*Stamp of the host Organisation*