

To be completed by the host institution

Letter of Confirmation

It is hereby certified that

Mr / Ms _____

was a student at our institution between

the following dates

_____/_____/201____ and ____/____/201____
day month day month

(exact start and end dates of student's studies)

in the department(s) of

Date

Stamp and Signature

Name of the signatory: _____

Function: _____

Please return to:
HAMK, International Office, Leena Rantanen, PO Box 230, FI-13101 Hämeenlinna
Email: international@hamk.fi