



Generalitat de Catalunya
Departament d'Educació
**Escola Superior de Disseny
i d'Art Llotja**

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ERASMUS PROGRAMME Academic year 20__ - 20__

CONFIRMATION OF ARRIVAL

(to be signed and stamped within 2 weeks of your arrival at the host institution)

Name of the student

Home institution: Escola Superior de Disseny i Art Llotja (E BARCELO69)

Host Institution:

Department(s)/ Faculty:

Arrival date:

(TO BE COMPLETED & STAMPED BY THE HOST INSTITUTION UPON THE STUDENT'S
ARRIVAL)

Name of Erasmus Representative:

Position:

Signature and official stamp:

Date (dd/mm/yyyy):