**PROGRAMA DE INTERCÂMBIO ACADÊMICO – FORMULÁRIO DE CHEGADA E PARTIDA**

*Academic Mobility Program – Arrival and Departure Form*

*Programa de Movilidad Académica – Forma de Llegada y Salida*



| ***To be filled in by the Brazilian student / Rellenado por el estudiante brasileño*** |
| --- |
| Nome:  |
| Curso na UPF:  |
| Telefone de contato no exterior:  |
| Endereço no exterior:  |
| E-mail atualizado:  |
|  |
| ***To be filled in by the Host University / Rellenado por la universidad anfitriona*** |
| *Host University / Universidad anfitriona:*  |
| *Country / País:*  |
| *Certify that the mentioned student has arrived in our University./ Atesto que el estudiante ha llegado a nuestra universidad.* |
|  |
| ***ARRIVAL / LLEGADA*** | *Arrival date / Fecha de llegada: \_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_* | ***Stamp of the Host University /*** ***Sello de la universidad anfitriona*** |
| ***Signature of the Host University /******Firma de la universidad anfitriona****Place / Lugar:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Signature / Firma:* *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Clarification of the signature / Aclaración de la firma:* *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Job title of the signatory / Cargo del firmante:* *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* |

| ***DEPARTURE / SALIDA*** | *Departure date / Fecha de salida: \_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_* | ***Stamp of the Host University /******Sello de la universidad anfitriona*** |
| --- | --- | --- |
| ***Signature of the Host University /******Firma de la universidad anfitriona****Place / Lugar:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Signature / Firma:* *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Clarification of the signature / Aclaración de la firma:* *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Job title of the signatory / Cargo del firmante:* *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* |