

Certificate of Attendance

Erasmus+ Programme Student Mobility for Studies/Traineeship¹ – 2022/2023

Name of the exchange student	Laura Kiss
Field of study	general medicine
Home University	Semmelweis University
Erasmus code of the Home University	HU BUDAPE08
Host Organization	Houston Methodist Hospital
Erasmus code of Host Organization (if they have)	

Confirmation of Arrival

We confirm that the above mentioned student has arrived at our Organization and has started his/her studies/practice¹

on (dd/mm/yyyy)	03/10/2022	
Responsible person/Erasmus coordinator/mentor/supervisor at the Host Organization	Name: Zsolt Garami MD	
	Position: HMAA program director, president	
	Email address: zgarami@houstonmethodist.org	
Date	03/10/2022	Stamp:
Signature		

Confirmation of Departure

We confirm that the above mentioned student has completed his/her studies/traineeships¹ and is leaving our Organization

on (dd/mm/yyyy)	23/12/2022	
the Certification about studies/trainees (Learning Agreement after the mobility)	☒ is given to the student	
	☐ will be sent directly to the International Office of the Home University	
Responsible person/Erasmus coordinator/mentor/supervisor at the Host Organization	Name: Zsolt Garami MD	
	Position: HMAA program director, president	
	Email address: zgarami@houstonmethodist.org	
Date	23/12/2022	Stamp:
Signature		

¹ Please underline the correct one.