

To the University of Trieste  
International Mobility Office  
34127 I - TRIESTE  
Tel: +39 040 558 2914  
E-mail: outgoing.students@amm.units.it

**LETTER OF DEPARTURE**  
**DOUBLE DEGREE**

*Enter the ending date of the activities*

We confirm that (surname/name) \_\_\_\_\_ enrolled at the  
University of Trieste finished his/her **physical mobility** (study Double Degree exchange) at (name  
of the Host University) \_\_\_\_\_  
on (ending date) \_\_\_\_\_ for \_\_\_\_\_ months  
in the academic year 2025/2026.

Date

**Signature and stamp of the International Office  
of the Receiving Institution**

\_\_\_\_\_

Please note:

If the signature and seal are missing, this document is not valid.

This certificate cannot be signed before the date of departure.