To the University of Trieste
International Mobility Office
34127 I -TRIESTE
Tel: +39 040 558 2994
E-mail: outgoing.students@amm.units.it

LETTER OF DEPARTURE

OVERSEAS

Enter the ending date of the activities

We confirm that (surname/name)_____from the University of Trieste finished his/her **physical mobility** (Overseas 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.