To whom it may concern.

This is to certify that …………………..………………………. from the University of Szczecin did visit

*Niniejszym potwierdzamy, że* (Name and title*) z Uniwersytetu Szczcińskiego odbył wizytę na/w*

…………………………………………………..

(Institution/Organization Name)

The first day of the visit was on:………………………………………………

*Data pierwszego dnia pobytu* (dates)

The last day of the visit was on:………………………………………………

*Data ostatniego dnia pobytu* (dates)

 ………………………………….

Sign and stamp of the representative of the Host Institution