TEXT IN RED TO BE DELETED FROM THE ORIGINAL DOCUMENT *Załącznik nr 5 do Regulaminu Programu Erasmus+ w AP/*

*Annex no.5 to Regulations of the Erasmus+ Programme at PU*

[To be printed on letterhead paper of the receiving institution

Please remove before printing]

LETTER OF INTENT

We agree to accept the student of Polonia University in Częstochowa, Poland for traineeship in our institution within the framework of the Erasmus+ Progamme.

Name and surname of the student: ..............................................................................

Planned period of the traineeship:

from ............................. *(date/month/year*) till ..................... *(day/month/year)*

Language of instruction: ..............................................................................

|  |  |
| --- | --- |
| *Name of the receiving institution:* |  |
| *Address:* |  |
| *Postal code, city:* |  |
| *Country:* |  |
| *Name and position* *of the person in charge:* |  |
| *E-mail:* |  |
| *Date:* |  |
| *Stamp and signature of the person in charge:* |  |