

Host Institution: Escola Superior de Saúde de Santarém – Instituto Politécnico de Santarém,
Portugal

Erasmus Code: PSANTARE01

IPS EUC Number: 47360-IC-1-2010-1-PT-ERASMUS-EUCX-1

IT IS HEREBY CERTIFIED THAT:

Mr./Mrs.:

ID/Passport:

From

Erasmus Code:

Has been a LIFELONG LEARNING / ERASMUS exchange student at our Institution:

From: _____ to _____ (___ months)

In the Health School of Santarém, NURSING area, under the lifelong learning agreement
signed between the _____ (_____) and the Instituto Politécnico de Santarém.

_____, _____ 2015

Stamp and Signature

Name of the signatory:

Position:

**This document should be sent back to the home institution, signed and stamped by the host
Institution.**