

**DEAR EXCHANGE PARTNERS, PLEASE FAX OR E-MAIL THIS
DOCUMENT TO OUR
OFFICE WITHIN THE FIRST WEEK OF OUR STUDENT ARRIVAL**

<i>FROM</i>	Name of the Organization _____		
	Office/ Department _____		
	Fax _____		
	Tel _____		
E-Mail _____			
<i>TO</i>	UFFICIO RELAZIONI INTERNAZIONALI UNIVERSITÀ DEGLI STUDI DELL'AQUILA TEL n.: +39 0862 432762/432758/432759 E-mail: relazioni.internazionali@strutture.univaq.it		
<i>SUBJECT</i>	CONFIRMATION OF ARRIVAL		
<i>FAX E-MAIL</i>	+39 0862 431217 relazioni.internazionali@strutture.univaq.it	<i>PAGES (this included)</i>	1

TO BE FILLED IN BY THE STUDENT

<i>Cognome/Nome</i>			
<i>Dipartimento c/o Università dell'Aquila</i>		<i>Matricola</i>	
<i>E-Mail</i>		<i>Firma</i>	

TO BE FILLED IN BY THE HOST ORGANIZATION

THE ABOVE MENTIONED STUDENT HAS ARRIVED TO OUR INSTITUTION ON THE DATE	(dd/mm/yy)			
Name of the Officer		<i>STAMP OF HOST ORGANIZATION</i>		
Signature				
Date				