



ANNEX III.

COMMITMENT TO THE SIGNING OF THE ERASMUS+ INTERINSTITUTIONAL AGREEMENT

INFORMATION ABOUT THE STAFF APPLICANT

Full name:	
ID Number:	E-mail:
University:	

INFORMATION ABOUT THE CONTACT PERSON AT THE HOST UNIVERSITY

Full name:	
Email:	Post:
University:	
Erasmus CODE:	

BOTH PEOPLE ABOVE MENTIONED ACKNOWLEDGE AND DECLARE:

- 1. That the host institution agrees to sign the **Erasmus+ Interinstitutional Agreement with the ceiA3 Consortium** in order to be able to host Staff Mobilities during the period 2023-2024.
- 2. That we know that if this agreement is not signed before the beginning of the mobility, it will not be possible to perform it, and the applicant will lose the right to receive any economic grant.

Signed in______, ____of____of 2023

The applicant	The contact person at the host university (signature and stamp)



