

CONFIRMATION OF ATTENDANCE

The present document shall be completed by a person in charge at the International Office of a Host Institution.

	• FALL/WINTER TERM	
Academic	• FULL ACADEMIC YEAR	
year/	• SPRING/SUMMER TERM	
Student's name		
is registered as an exchange stud	ent at	
	(name of l	ost institution)
PART A:		
The student has to send it to thouse outgoing.gsb@hse.ru within 10 w		ss' International Office by e-mail te.
DATE OF ARRIVAL (dd/mm/yyy	y)	
Name of the person in charge:		
Position:		
Date: Signa		Stamp
PART B:		
The student has to send it to the outgoing.gsb@hse.ru within 5 wo		•
DATE OF DEPARTURE (dd/mm/	уууу)	
Name of the person in charge:		
Position:		
Date: Signa	ture:	Stamp