Reference: REQ /202 ........... / ........................

**Details of the applicant**

Surname(s): Name:

**Details of the host institution**

Name of the institution (institute / faculty / department / research centre):

Person responsible for the stay at the host institution

Full name: Position:

Person in charge at the host institution

Full name: Position:

**THIS IS TO CERTIFY**: That the aforementioned researcher has carried out a stay in the following period:

Start date: End date:

(Stamp of the host institution and signature of the person in charge)

(Signature of the person in charge of the project)

(Signature of the certifying person and stamp of the institution, not necessary if signing electronically)

Castelló de la Plana, .......... ........................................................ 20.......