



Logo of the University/Research Center

## Host Institution Acceptance for STM

**STM candidate Name:** \_\_\_\_\_

**Home Institution:** \_\_\_\_\_

**STM Project Title:** \_\_\_\_\_

**STM Supervisor:** \_\_\_\_\_

**Position of the Supervisor:** \_\_\_\_\_

**Period of Stay:** \_\_\_\_\_

**Host Institution:** \_\_\_\_\_

Signature of the Supervisor at the Host Institution

Signature of the Head of Host Institution

Date of Acceptance