

Extension of the grant due to a **PREPARATORY LANGUAGE COURSE** DIRECTLY BEFORE the Erasmus traineeship **IN THE TARGET COUNTRY**

Name, First name:

I confirm that I will take part in a **Language Course**:

from

till

[day/month/year]

at the following institution:

Language:

Hours per week of language course:

Thus, the granted period for the traineeship will last

days longer

than originally stipulated in the Learning Agreement.

After the traineeship, the trainee will provide evidence of his/her participation in the language course by handing in a confirmation of the Language Course (Teilnahmebescheinigung) including the exact dates of the course.

Place:

Date:

Signature: _____

Trainee

Office for Erasmus traineeships Saxony-Anhalt

Place: Magdeburg

Date:

Signature: _____

Angela Wittkamp, Head of Office for Erasmus traineeships Saxony-Anhalt