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**CERTIFICATE**

This is to confirm that

**Name and Surname of the Participant**

participated in the Virtual (type of the activity e.g. Short-term exchange of groups of pupils, Short-term joint staff training event etc.) of the project

*Name of the project*

*Project contract number (e.g. 2019-1-SK01-KA200-123456)*

between (start date) and (end date)

......................................................

Name and Position of the Legal Representative

Hosting Organisation’s Name and Address

Date of Signature