**Endorsement of Prolongation**

|  |  |  |
| --- | --- | --- |
| **Student’s data:** | | |
| Last name(s): |  | |
| First name(s): |  | |
| Date of Birth (dd/mm/yyyy): |  | |
| **Original period of mobility:** | | |
| From (dd/mm/yyyy): |  | |
| To (dd/mm/yyyy): |  | |
| **New period of mobility:** | | |
| From (dd/mm/yyyy): |  | |
| To (dd/mm/yyyy): |  | |
| **Receiving institution’s data:** | | |
| Name: |  | |
| Erasmus code (if applicable): |  | |
| Contact person: |  | |
| name: |  | |
| position: |  | |
| e-mail: |  | |
| The student’s requirement of prolongation is | | |
| accepted | | not accepted |
| Date: |  | |
| Signature: |  | |
| Stamp: |  | |
| **Sending institution’s data:** | | |
| Name: | **Pázmány Péter Catholic University** | |
| Erasmus code (if applicable): | **HU BUDAPES12** | |
| Contact person: |  | |
| name: |  | |
| position: |  | |
| e-mail: |  | |
| The student’s requirement of prolongation is | | |
| accepted | | not accepted |
| Date: |  | |
| Signature: |  | |
| Stamp: |  | |