..............................................................................
[Full name of the host university]

..............................................................................
[Address of the host university]

**CONFIRMATION OF ACCEPTANCE FOR A RESEARCH INTERNSHIP**

within the framework of cooperation with Bialystok University of Technology

we hereby confirm our readiness to host the following candidate for a research internship:

**Candidate’s full name:**
.................................................................................
**Academic status:**
☐ PhD student  ☐ academic staff member
**Home institution - Bialystok University of Technology:**
.................................................................................

**Planned duration of the internship:**

From: .........................  To: .........................

**Planned research activities during the internship:**

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

**Topics of lectures or seminars to be delivered by the candidate at the host institution:**

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

**Academic supervisor at the host institution:**

**Full name:**
.................................................................................
**Academic title / degree:**
.................................................................................
**Department / Unit:**
.................................................................................
**E-mail address:**
.................................................................................

We hereby confirm our willingness to host the above-mentioned candidate for a research internship in our institution, in accordance with the proposed research plan and lecture topics.

**Place and date:**
..................................................., on ..................................

**Signature and stamp of the authorized representative of the host institution:**

...............................................................
(full name, position, signature)
(institutional stamp)