



Declaration of Travel Activities

| | |
|---------------------|-------|
| Name: | _____ |
| Nationality: | _____ |
| E-mail: | _____ |

The following list specifies the country/countries where I will stay beyond the predefined EIMAS mobility scheme.

| From DD/MM/YYYY to DD/MM/YYYY | Country |
|-------------------------------|---------|
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I confirm that the given information is correct and complete.

I will submit a declaration for each semester or travel activity.

In case of a delayed report, I am aware that I will be requested to refund the subsistence allowances corresponding to the time I stayed abroad if applicable.

Date, Signature