***Statement by the visiting teacher/expert***

*By signing below*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Name and surname*

*I declare that I will participate in the project* *Visiting foreign teachers UL 2019-2022 (Gostujoči tuji strokovnjaki UL 2019-2022)* *as a visiting teacher / expert* in the academic year \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Currently I am employed at*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

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*Full title of the institution, city and state*

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| **Visiting teacher/expert**  Name:  Signature: Date: |

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| **The Sending institution**  Name of the responsible person:  Signature: Date:  *stamp* |