Headed paper of the University/Institution

To whom it may concern

I herewith as (head of Department…..) confirm that prof./dr. ……………..is a full/associate professor/researcher at ……………………department of…………………………..since………………..

Professor’s………………….research focuses mainly on………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

I also agree and allow prof./dr……………………to work at the University of Bergamo as a visiting Professor/Scholar from………………..to……………………………………………………………

Regards,

Signature

stamp