PROGRAMA “JOSÉ CASTILLEJO” PARA ESTANCIAS DE MOVILIDAD EN EL EXTRANJERO DE JÓVENES DOCTORES

## INFORME Y CERTIFICADO DE ESTANCIA DE EL/LA INVESTIGADOR/A RESPONSABLE

**(Report and stay certificate by the foreign host researcher/professor in charge)**

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| --- |
| APELLIDOS, NOMBRE:  **(Surnames, name)**  REFERENCIA:  **(Reference)** |

A CUMPLIMENTAR POR EL/LA INVESTIGADOR/A RESPONSABLE DEL TRABAJO EN EL EXTRANJERO **(To be completed by the foreign host researcher/professor in charge)**

EL/LA ABAJO FIRMANTE, CERTIFICA QUE EL/LA INVESTIGADOR/A AL QUE SE REFIERE ESTE DOCUMENTO HA DESARROLLADO SU TRABAJO DE INVESTIGACION EN EL CENTRO DE TRABAJO DURANTE EL PERIODO SEÑALADO A CONTINUACIÓN

**(The undersigned certifies that the above-named researcher/professor has developed his research work at the host center during the period indicated below)**

PAÍS CENTRO RECEPTOR:

**(Country host research)**

CENTRO RECEPTOR**:**

**(Foreign host research/academic center)**

NOMBRE DE EL/LA INVESTIGADOR/A RESPONSABLE**:**

**(Host researcher/professor in charge)**

CARGO **(Position):**

PERIODO DE ESTANCIA REALIZADO (**Period of stay**)

DESDE/**From:**   /     /20   HASTA**/To:**   /     /20

**día, day/mes, month/año,year día, day/mes, month/año, year**

INFORME Y OPINIÓN DE EL/LA INVESTIGADOR/A RESPONSABLE SOBRE LA LABOR REALIZADA POR EL/LA INVESTIGADOR/A **(It is requested that the host researcher/professor in charge give his/her opinion on the work carried out for the researcher**)**:**

FIRMA DE EL/LA INVESTIGADOR/A RESPONSABLE

**(Signature of the researcher in charge/professor in charge)**

FECHA/ DATE:   /  /

(Solo si firma manualmente/Only if signed by hand)

En caso de no tener firma digital deberá firmarlo manualmente incluyendo fecha y sello (si lo tuviera) / If a digital signature was not available, please sign manually and add the date and the seal of the institution