***Please use institutional header***

**Letter of Support for an STSM from Home Institution**

Place, date: Town, Country, Day of Month of 202x

**STSM Applicant:** First name Last name

**Home Institution:** University of XXXX, Country

**Scientist responsible at Home Institution:** First name Last name

**Host Institution:** University of YYYY, Country

**Scientist responsible at Host Institution:** First name Last name

**STSM title:**

**STSM start and end date:** DD/MM/YYYY to DD/MM/YYYY

Hereby, I (*name of the responsible person typically a head of the lab - at HOME institution)* confirm that I support the visit of Mr./Ms./Dr. *(First name Last name of applicant)*, from *(Home institution)* for developing a short-term scientific mission at *(Host institution)* in the period from (*dd-mm-201x*) until (*dd-mm-201x*), within the framework of the COST Action IMPROVE (CA21139). The work plan for the proposed STSM entitled (*Title of the proposal*) is described in the application. (*Justification for STSM*) This STSM will have a mutual benefit for the applicant, and both for the home and host institution, in consideration of both the specific activities to be performed and the expected strengthening of cooperation between the Home and Host institutions. Moreover, the STSM does not interfere with any obligatory duties of the applicant at the Home institution.

*First name Last name of the responsible person from the Home institution*

Signature