**key action 1 – mobility of individuals**

**higher education students**

**erasmus +**

**STUDENT APPLICATION FORM**

**(Photograph)**

**ACADEMIC YEAR 20 \_ \_ /20 \_ \_**

**FIELD OF STUDY**: .........................................................

This application should be completed in BLACK in order to be easily copied and/or telefaxed.

|  |
| --- |
| **SENDING INSTITUTION, FACULTY**  Name and full address: ......................................................................................................................................  ............................................................................................................................................................................  Tutor - name, telephone and telefax numbers, e-mail box ..................................................  ............................................................................................................................................................................  ............................................................................................................................................................................  Dean - name, telephone and telefax numbers, e-mail box ..................................................  ............................................................................................................................................................................  ............................................................................................................................................................................ |

**STUDENT’S PERSONAL DATA**

*(to be completed by the student applying)*

|  |  |
| --- | --- |
| Family name: .......................................................  Date of birth: .......................................................  Sex: ...............Nationality:...................................  Place of Birth: .....................................................  Current address: ..................................................  ..............................................................................  ..............................................................................  ..............................................................................  Current address is valid until: .............................  Tel.: .....................................................................  e-mail:.................................................................. | First name (s): .................................................................  Permanent address (if different): ....................................  ..........................................................................................  ..........................................................................................  ..........................................................................................  ..........................................................................................  Tel.: ................................................................................. |

**PREVIOUS PARTICIPATION IN ERASMUS YES/NO**

**Previous participation in Erasmus at the same level of study**

**Study Cycle**: **FIRST**

**SECOND**

**THIRD**

**Study** (Number of months):……………………………………………………………….

**Placement** (Number of months):.........................................................................................

**LIST OF INSTITUTIONS WHICH WILL RECEIVE THIS APPLICATION FORM (in order of preference):**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Institution | Country | Period of study  from to | | Duration of stay (months) | N° of expected credits  (hours) |
| 1. ........................................  2. ........................................  3. ........................................ | .....................  .....................  ..................... | .............  .............  ............. | ...........  ...........  ........... | ...................  ...................  ................... | ........................................  ........................................  ......................................... |

|  |
| --- |
| Name of student: ...............................................................................................................................................  Sending institution, Faculty:  ............................................................................................. Country: ............................................................... |

|  |
| --- |
| Briefly state the reasons why you wish to study abroad ?  ...........................................................................................................................................................................  ............................................................................................................................................................................  ............................................................................................................................................................................ |

**LANGUAGE COMPETENCE**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Mother tongue: ................... Language of instruction at home institution (if different): .................................. | | | | | | |
| Other languages | I am currently studying this language | | I have sufficient knowledge to follow lectures | | I would have sufficient knowledge to follow lectures if I had some extra preparation | |
|  | yes | no | yes | no | yes | no |
| ..........................  ..........................  .......................... | 🞏  🞏  🞏 | 🞏  🞏  🞏 | 🞏  🞏  🞏 | 🞏  🞏  🞏 | 🞏  🞏  🞏 | 🞏  🞏  🞏 |

**WORK EXPERIENCE RELATED TO CURRENT STUDY (if relevant)**

|  |  |  |  |
| --- | --- | --- | --- |
| Type of work experience  ..............................................  .............................................. | Firm/organisation  .............................................  ............................................. | Dates  .............................  ............................. | Country  .......................................  ....................................... |

**PREVIOUS AND CURRENT STUDY**

|  |
| --- |
| Diploma/degree for which you are currently studying: ....................................................................................  Number of higher education study years prior to departure abroad: ................................................................  Have you already been studying abroad ? Yes 🞏 No 🞏  If Yes, when ? at which institution ? .................................................................................................................  **The attached Transcript of records includes full details of previous and current higher education study. Details not known at the time of application will be provided at a later stage.** |

|  |  |
| --- | --- |
| Do you wish to apply for an ERASMUS + mobility grant to assist towards the additional costs of your study period abroad? Yes 🞏 No 🞏 | |
| **RECEIVING INSTITUTION, Department:**  ........................................................................................................................................................................................................................................................................................................................................................ | |
| We hereby acknowledge receipt of the application, the proposed learning agreement and the candidate’s Transcript of records. | |
| The above-mentioned student is 🞏  🞏  Tutor’s signature  ..............................................................................  Date: .................................................................... | provisionally accepted at our institution  not accepted at our institution  Dean’s signature  ..........................................................................................  Date :................................................................................ |
|  | |

*I hereby give consent for my personal data included in my application to be processed for the purposes of the project under the Personal Data Protection Act as of 29 August 1997, consolidated text: Journal of Laws 2002, item 1182 as amended.*