**STUDENT APPLICATION FORM**

**ERASMUS+**

**Academic Year 2020/2021**

**for studies:**  **for traineeship:**

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

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| **SENDING INSTITUTION**  Name and full address: ………………………………………………………………………………………………  ………………………………………………………………………………………………………………………  Department coordinator - name, telephone and fax numbers, e-mail: ……... ……………………………………….  ………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………  Institutional coordinator - name, telephone and fax numbers, e-mail: ……………………………………………….  ………………………………………………………………………………………………………………………  ……………………………………………………………………………………………………………………… |

**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.: …………………………………………………… |

**LIST OF INSTITUTIONS WHERE YOU WOULD LIKE TO STUDY/PRACTICE** *(in order of preference):*

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

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| Briefly state the reasons why you wish to study/practice 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/ participate in training | | I would have sufficient knowledge to follow lectures/ participate in training if I had some extra preparation | |
|  | yes | no | yes | no | yes | no |
| ………………  ………………  ……………… | 🞏  🞏  🞏 | 🞏  🞏  🞏 | 🞏  🞏  🞏 | 🞏  🞏  🞏 | 🞏  🞏  🞏 | 🞏  🞏  🞏 |

**WORK EXPERIENCE RELATED TO CURRENT STUDY / TRAINING PLANNED** *(if relevant)*

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

**PREVIOUS AND CURRENT STUDY**

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| Diploma/degree for which you are currently studying: ……………………………………………………………..  Number of higher education study years prior to departure abroad: ………………………………………………..  Have you already been studying / working 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.** |

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| Do you wish to apply for a mobility grant to assist towards the additional costs of your study/training period abroad?  Yes 🞏 No 🞏 |

|  |  |
| --- | --- |
| **SENDING INSTITUTION** | |
|  | |
| Student’s signature  …………………………………………….  Date: ……………………………………… | Institutional coordinator’s signature  ……………………………………………………  Date: ……………………………………………... |