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| |  |  |  | | --- | --- | --- | |  |  |  |   **APPLICATION FORM**  **ERASMUS+ STUDENT MOBILITY FOR STUDIES**      Photo |

**I PERSONAL DATA**

|  |  |
| --- | --- |
| First Name |  |
| Family Name |  |
| Gender |  |
| Date and Place of Birth |  |
| Nationality |  |
| Passport number |  |

**II CONTACT INFORMATION**

|  |  |
| --- | --- |
| e-mail |  |
| Phone number |  |
| Current address |  |
| Permanent address (if different) |  |

**III ACADEMIC INFORMATION**

|  |  |
| --- | --- |
| Faculty |  |
| Study Programme |  |
| Study Level |  |
| Start Date |  |
| Programme Duration |  |
| ECTS obtained at the time of application |  |

**IV LANGUAGE PROFICIENCY**

|  |  |
| --- | --- |
| Mother Tongue |  |
| English Language | *choose* |

**V HOST INSTITUTION**

|  |  |
| --- | --- |
| University/Academy |  |
| Country |  |
| Study Programme |  |
| Planned Duration of Mobility |  |
| Planned Period of Mobility | Start: *enter date* — End: *enter date* |

**VI PRELIMINARY LIST OF COURSES AT HOST INSTITUTION\***

|  |  |  |
| --- | --- | --- |
| COURSE CODE | COURSE UNIT | ECTS |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

\* It is required to obtain minimum 30 ECTS

**VII ERASMUS+ SCHOLARSHIP**

|  |  |
| --- | --- |
| Have you ever received an Erasmus scholarship before? | *Choose an item.* |
| If yes, please give us more details about it. |  |
| Are you applying for additional funding for students with disability?\*\* | *Choose an item.* |

\*\* Terms defined by the Call

**VIII CHECKLIST**

|  |  |
| --- | --- |
| Required documents for all candidates: | Application Form  CV  Motivation letter  Language Certificate  Transcript of Records  Passport scan  If applicable, documents for additional funding for inclusion support  Any other specific document required by a Home or Host university, if indicated in the Call |

**IX STATEMENT**

|  |
| --- |
| I hereby state that my Erasmus+ mobility will not be funded by other EU funds.  I confirm that all submitted documents are true and that persons authorized to check, process and evaluate applicants under the Erasmus+ Mobility Programme can use the data they provide.  I confirm that I have read and comply with the Statement of Data Protection Compliance. |

**X SIGNATURE**

|  |
| --- |
| I sign this application form electronically by ticking the box. |

Date: *Enter a date.*