

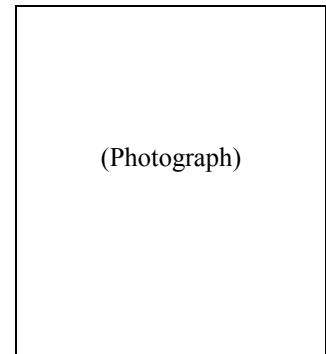


**LIFELONG LEARNING PROGRAMME / ERASMUS – ECTS**

**STUDENT APPLICATION FORM**

**ACADEMIC YEAR: 20.../20...**

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



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

**SENDING INSTITUTION: Name and full address:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
**Departmental 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)**

<b>Family name:</b> .....	<b>First name (s):</b> .....
<b>Date of birth:</b> .....	.....
<b>Sex:</b> ...M/F.... <b>Nationality:</b> .....	.....
<b>Place of birth:</b> .....	.....
<b>e-mail address:</b> .....	.....
<b>Current address:</b> .....	<b>Permanent address (if different):</b> .....
.....	.....
.....	.....
<b>Current address is valid until:</b> .....	.....
<b>Tel. no (incl. country code nr.):</b> .....	<b>Tel:</b> .....

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

Institution	Country	Period of study		Duration	No. of e x p e c t e d  E C T S  c r e d i t s
		From	To		
1.....	.....	.....	.....	.....	.....
2.....	.....	.....	.....	.....	.....
3.....	.....	.....	.....	.....	.....

Name of student: .....

Sending institution : \_\_\_\_\_ Country : \_\_\_\_\_

Briefly state the reasons why you wish to study abroad:.....  
.....  
.....

**LANGUAGE COMPETENCE**

Note: A proof of knowledge of the receiving institution's language of instruction should be submitted

Mother tongue: .....		Language of instruction at home institution (if different): .....		
Other languages	I have sufficient knowledge to follow lectures		I need some extra preparation	
	YES	NO	YES	NO
.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

WORK EXPERIENCE RELATED TO CURRENT STUDY (if relevant)

Work experience / position	Firm /organization	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 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.

Student's Signature..... Date:.....

**RECEIVING INSTITUTION**

We hereby acknowledge receipt of the application, the proposed learning agreement and the candidate's Transcript of records.

The above-mentioned student is  provisionally accepted at our institution  
 not accepted at our institution

Departmental coordinator's signature Institutional coordinator's signature

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Date: ..... Date: .....