

# STUDENT APPLICATION FORM

(Photograph)

ACADEMIC YEAR 20.. /20..

FIELD OF STUDY: .....

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

<p><b>SENDING INSTITUTION</b>                  Name and full address: .....</p> <p>Coordinator - name, telephone, fax and e-mail:                  .....</p>
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**STUDENT'S PERSONAL DATA (to be completed by the student applying)**

Family name: ..... First name/s: .....  Birth date: .....  Sex: ..... Nationality:.....  Place of Birth: .....	Current address: ..... ..... Current address valid till:.....  Tel.: .....  Permanent address (if different from current address): ..... ..... Tel.: .....
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**LIST OF INSTITUTIONS WHICH WILL RECEIVE THIS APPLICATION FORM (in order of preference):**

Institution	Country	Period of studies		Duration of stay (months)	Number of expected ECTS credit
		from	to		
1.					
2.					
3.					

Briefly state the reasons why you wish to study abroad ? ..... ..... .....
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**LANGUAGE COMPETENCE**

Mother tongue: ..... Language at sending institution (if different): .....

Other languages	I am studying this language		I have sufficient knowledge of the language to follow lectures		I would have sufficient knowledge to follow lectures if I had some extra preparation	
	YES	NO	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"/>	<input type="checkbox"/>	<input type="checkbox"/>

**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 o No o

If Yes, when and at which institution ? .....

**The attached transcript of records includes full details of previous and current higher study. Details not known at the time of application will provided be at a later stage.**

Do you wish to apply for a mobility grant to assist towards the additional costs of your study abroad?  
Yes o No o

**RECEIVING INSTITUTION**

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

The above-mentioned student has been	<input type="radio"/>	provisionally accepted at our institution
Departmental coordinator's signature	<input type="radio"/>	not accepted at our institution
		Institutional coordinator's signature

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