**ECTS – EUROPEAN CREDIT TRANSFER AND ACCUMULATION SYSTEM**

**STUDENT APPLICATION FORM**

|  |  |  |  |
| --- | --- | --- | --- |
| **(Photograph)** |  |  |  |

**ACADEMIC YEAR 20…/ 20…**

**FIELD OF STUDY: …**

This application should be completed in BLACK in order to be easily copied, faxed or e-mailed.

**SENDING INSTITUTION**

|  |
| --- |
| Name and full address:  Department coordinator – name, telephone, fax and e-mail  ……………………………  Institutional Coordinator – name, telephone, fax and e-mail  ……………………… |

**STUDENT’S PERSONAL DATA**

**(*to be completed by the applying student*)**

|  |  |
| --- | --- |
| Surname: | First Name: |
| Date of birth (dd/mm/yyyy): | Sex: Female  Male |
| Nationality: | Place of birth: |
| Current address:  Address valid until: (dd/mm/yyyy)  Tel:  Fax:  E-mail: | Permanent address (if different):  Tel:  Fax:  E-mail: |

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Institution | Country | Period of study | | length of Stay  (months) | No. of ECTS credits expected |
| From  (dd/mm/yyyy) | To  (dd/mm/yyyy) |
| 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |

|  |
| --- |
| Name of Student:  Sending institution: (*your university name*)  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 |
| 1. English |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |
| 4. |  |  |  |  |  |  |

WORK EXPERIENCE RELATED TO CURRENT STUDY (if relevant)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Type of work experience | Company / Organisation | From  (day/month/year) | To  (day/month/year) | Country |
| 1. |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |
| 4. |  |  |  |  |

**PREVIOUS AND CURRENT STUDY**

|  |  |  |
| --- | --- | --- |
| Diploma/Degree for which you are currently studying:  Bachelor’s  Master’s Degree  Number of study years at higher education level prior to departure: | | |
| Have you already studied abroad? | Yes | No |
| If yes, at which institution? |  | |
| When? | From | To |
| (dd/mm/yyyy) | (dd/mm/yyyy) |
| **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 a mobility grant to assist towards the additional costs of your study period abroad? | |
| Yes | No |

**RECEIVING INSTITUTION**

|  |  |
| --- | --- |
| We hereby acknowledge receipt of the application, the proposed learning agreement and the candidate’s transcript of records. | |
| The above named student is: | Provisionally accepted at our institution |
| Not accepted at our institution |
| Departmental Coordinator’s signature  ……………………………………………….  Date: | Institutional Coordinator’s signature  ………………………………………………..  Date: |