

# ERASMUS+ STUDENT MOBILITY OUTGOING STUDENT APPLICATION



FOR ACADEMIC YEAR 2014 / 2015

This application should be completed in clear block capital letters and returned before 15<sup>th</sup> March – for the winter semester, or summer semester or full academic year – to the International Office, room 158

## STUDENT'S PERSONAL DATA

Family name: _____	First name (s): _____
Date of birth: _____	_____
Place of Birth: _____	Sex: _____ Nationality: _____
Current address: _____	Permanent address (if different): _____
Tel.: _____	E-mail: _____
Current address is valid until: _____	

## PREVIOUS AND CURRENT STUDY

Grade Point Average (cumulative): _____	Index number: _____
Field of study: _____	
Expected study level during exchange:: _____	Current semester of study: _____
Have you already been studying abroad ?      Yes <input type="checkbox"/> No <input type="checkbox"/>	
If Yes, when ? at which institution ? what programme ? _____ _____	

## 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 <input type="checkbox"/>	no <input type="checkbox"/>	yes <input type="checkbox"/>	no <input type="checkbox"/>	yes <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"/>

## WHERE WOULD YOU LIKE TO STUDY (list of institutions in order of preference):

Institution (code)	Country	Period of study		Duration of stay (months)	N° of expected ECTS credits
		from	to		
1 _____					
2 _____					
3 _____					
4 _____					

## WORK EXPERIENCE RELATED TO CURRENT STUDY (if relevant)

Type of work experience	Firm/organisation	Dates	Country

Briefly state the reasons why you wish to study abroad ?

Do you wish to apply for a mobility grant to assist towards the additional costs of your study period abroad?

Yes ☐

No ☐

Name of student: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Tutor's recommendation (optional):

Tutor's name: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_