STUDENT APPLICATION FORM: Erasmus + Mobility for Studies

(Photograph)

ACADEMIC YEAR 20…./20….

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

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

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| SENDING INSTITUTION  Name and full address: .....................................................................................................................................  ............................................................................................................................................................................  Department coordinator - name, telephone and telefax numbers, e-mail box ..................................................  ............................................................................................................................................................................  ............................................................................................................................................................................  Institutional coordinator - name, telephone and telefax numbers, e-mail box ..................................................  ............................................................................................................................................................................  ............................................................................................................................................................................ |

STUDENT’S PERSONAL DATA

*(to be completed by the student applying)*

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| --- | --- |
| Family name: .......................................................  Date of birth: .......................................................  Sex: ...............  Nationality:...........................................................  Citizenship:……………………………………..  Place of Birth: .....................................................  Current address: ..................................................  ..............................................................................  ..............................................................................  ..............................................................................  Tel.: .....................................................................  E-mail address: ………………………………… | First name (s): .................................................................  Permanent address (if different): ....................................  ..........................................................................................  ..........................................................................................  ..........................................................................................  ..........................................................................................  Tel.: .................................................................................. |

DETAILS CONCERNING THE STUDY PERIOD:

|  |  |  |
| --- | --- | --- |
| Planned period of study at NTU “KhPI” | Duration of stay (months) | N° of expected ECTS credits |
| From ……/……… to ……/………  month/year month/year |  |  |
| Briefly state the reasons why you wish to study abroad ?  ...........................................................................................................................................................................  ............................................................................................................................................................................  ............................................................................................................................................................................ | | |

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| --- |
| Name of student: ...............................................................................................................................................  Sending institution: .................……………………….................................... 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 provided be at a later stage. |

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

ACCOMMODATION REQUEST:

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| --- |
| Do you wish to use accommodation provided by NTU “KhPI” during your study period?  Yes 🞏  No 🞏 |

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| --- | --- |
| RECEIVING INSTITUTION | |
| We hereby acknowledge receipt of the application, the proposed Learning Agreement for Studies and the candidate’s Transcript of records. | |
| The above-mentioned student is 🞏  🞏  Departmental coordinator’s signature  ..............................................................................  Date: .................................................................... | provisionally accepted at our institution  not accepted at our institution  Faculty coordinator’s signature  ..........................................................................................  Date :................................................................................ |
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