|  |
| --- |
| Attach your photo |

 ****

**STUDENT APPLICATION FORM**

**ACADEMIC YEAR 20\_ \_ /20\_ \_**

**SENDING INSTITUTION**

|  |  |  |
| --- | --- | --- |
| **Name and full address of the sending institution** |  | **Erasmus Code** |
|  |
| **Departmental coordinator** | Name: |
| Telephone: |
| E-mail: |
| **Institutional coordinator** | Name: |
| Telephone: |
| E-mail: |

**STUDENT’S PERSONAL DATA**

|  |  |
| --- | --- |
| **First Name/s** |  |
| **Last Name/s** |  |
| **Male/Female** |  | **Nationality** |  |
| **E-mail** |  | **Telephone** |  |

**CURRENT STUDY**

|  |  |  |  |
| --- | --- | --- | --- |
| **Degree for which you are currently studying** | Bachelor [ ]  | Master [ ]  | PhD [ ]  |
| **Field of Study** |  |

**MOTIVATION**

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

**DURATION OF STAY AT THE RECEIVING INSTITUTION**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Start date**  | *dd/mm/yy* | **End date** | *dd/mm/yy* | **Number of months** |  |

**ACCOMMODATION**

|  |  |  |
| --- | --- | --- |
| **Do you want to reserve a place in the student hall of residence?** | **Yes**  [ ]  | **No**  [ ]  |
| **Dates for accommodation reservation** | **Arrival date:***dd/mm/yy* | **Departure date:***dd/mm/yy* |

**STUDENT**

|  |  |
| --- | --- |
| **Name** |  |
| **Signature** |  | **Date** | *dd/mm/yy* |

**RECEIVING INSTITUTION**

|  |
| --- |
| **We hereby acknowledge receipt of the application, the proposed Learning Agreement and the candidate’s Transcript of Records.** |
| **Institutional coordinator:** Assoc. Prof. Boryan Yanev, PhD |
| **Signature** |  | **Date** | *dd/mm/yy* |