**UNIVERSITY OF LODZ**

**APPLICATION FORM FOR APPLICANTS OF**

**ERASMUS+CREDIT MOBILITY 2016/2017**

|  |  |  |  |
| --- | --- | --- | --- |
| **PERSONAL INFORMATION** | | | |
| First Name |  | Last Name |  |
| Date of Birth |  | City of Birth |  |
| Nationality |  | Gender | Male  Female |
| Passport Number |  | Date of expiry |  |
| E-mail Address |  | Mobile Phone/Telephone |  |
| Averaged grade |  | Language competences |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **PERMANENT ADDRESS** | | | |
| Street and number |  | City |  |
| Postal Code |  | State/Province |  |
| Country |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **PERMANENT ADDRESS FOR CORRESPONDENCE IF DIFFERENT FROM ABOVE** | | | |
| Street and number |  | City |  |
| Postal Code |  | State/Province |  |
| Country |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **LEVEL OF STUDIES** | | | |
| Name of  Home University |  | Faculty |  |
| Bachelor/Master/PhD |  | Number of completed higher education study year |  |
| Country |  | Semester of study |  |
| Last Degree Obtained |  | I was grantee of Erasmus Mundus Programme\*or Credit Mobility[[1]](#footnote-2) | No  Yes  If yes for how long……………… |
| Start Date of Studies |  | Date of awarding institution |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **LANGUAGE PROFICIENCY** | | | |
| Language | English | Skills |  |
| Official certificates |  |  |  |

|  |
| --- |
| Applicant’s Signature: Date: Year Month Day |

1. If you have benefited from Erasmus Mundus or Credit Mobility scholarship for more than or equal to 7 months in total, you are not eligible to apply for Credit Mobility programme. If you have been selected for Erasmus Mundus or Credit Mobility scholarship for the period of 5 or 6 months you can apply for Credit Mobility. However, preference will be given to the applicant who has never benefited from an Erasmus Mundus or Credit Mobility scholarship. [↑](#footnote-ref-2)