**APPLICATION FORM FOR ERASMUS EXCHANGE STUDENTS – GENERAL INFORMATION**

**PLEASE FILL IN CLEARLY – USE CAPITALS IF FILLED OTHER THAN ELECTRONICALLY**

Photo

**Type of ERASMUS mobility**

🗌 Study

🗌 Practical placement

**Sending institution:**

|  |  |  |
| --- | --- | --- |
| Name, ERASMUS code and full address |  | |
| Departmental coordinator | Name: | Fax: |
| Phone: | e-mail: |
| Institutional coordinator | Name: | Fax: |
| Phone: | e-mail: |

**Student’s personal data** *(to be completed by the student applying)*

|  |  |  |
| --- | --- | --- |
| Family name: | | |
| First name(s): | | male  female |
| Date of birth: dd/mm/yyyy | Place of birth: | |
| Country of birth: | Nationality: | |
| Passport number: | Marital status: married  single | |
| **Current address: (any correspondence, including the letter of acceptance will be sent to this address):**  Street & number:  Postal code & city:  Country: | Permanent address (if different):  Street & number:  Postal code & city:  Country: | |
| Phone no: | **e-mail**: | |

Previous education

|  |
| --- |
| Level of study: 🗌 Bachelor’s 🗌 Master’s 🗌 doctoral studies |
| For how many years have you been enrolled at home institution? |
| How many semesters have you completed prior to your departure abroad? |

|  |
| --- |
| State briefly the reasons why you wish to study abroad. |

The field of study you wish to be registered at University of Petrosani

<https://www.upet.ro/en/>

|  |
| --- |
| Faculty: |
| Study Program: |

Period of the study/practical placement you wish to be registered at University of Petrosani:

Autumn semester  Spring semester

Whole academic year  Other .....................

**I hereby I declare that all information provided in this application form and the enclosures is correct:**

|  |
| --- |
| Date, place:  Student’s signature: |

|  |  |
| --- | --- |
| **To be signed by the home university (sending institution)** | |
| Name of partner university: | |
| Name of the signatory: | |
| Title of the signatory: | Email of the signatory: |
| Date: | Signature:  Stamp |

|  |  |  |
| --- | --- | --- |
| **To be signed by the T UNIVERSITY OF PETROSANI (receiving institution):** | | |
| **The above mentioned student is: 🗌** **accepted at my institution**  **🗌 not accepted at my institution** | | |
| Title of the signatory | Erasmus Coordinator | |
| Name of the signatory | Lecturer PhD Oana Carmen RĂVAȘ | |
| Date: | Signature: | Signature:  Stamp |

**PLEASE RETURN THIS APPLICATION WITH THE ENCLOSURES:**

🗌 2 copies of the proposedLearning Agreement (for study) / Training Agreement (for practical placement);

🗌 Transcript of Record: an official list of courses you have attended so far at the home university;

🗌 English Language Requirement Form for Exchange Students – *see below page 3;*

🗌 Accommodation form (if accommodation is required at one of the university dormitory) – *see below page 4;*

🗌 1 copy of your passport/ID card;

🗌 3 photos of 35 mm x 45 mm.