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**2019-2020 ACADEMIC YEAR
INTERNATIONAL CREDIT MOBILTY-ICM**

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| **APPLICATION FORM for Students Mobility**  |
| Name- Surname: | Gender: M 🞏 F 🞏 | Nationality: | PHOTO |
| Date- Place of birth:dd/mm/yyyy  | Passport-National ID number: | Intended term of study:🞏 Fall 🞏 Spring 🞏 Both  |
| Home country: | Home university: | Erasmus Code/PIC code: |
| Field of study:  | Level of study:🞏 Bachelor 🞏 Master 🞏 Doctorate  | Year of study:1 🞏 2 🞏 3 🞏 4 🞏 |
| Telephone: | E-mail: | Address: |
| Contact person for emergency: | Contact telephone/e-mail for emergency: |
| **SELECTION CRITERIA** |
| English Proficiency:*(Attach a proof of English proficiency (if medium of instruction or mother language is not English)* | GPA:*(Attach your updated transcript.)* |
| Special need: Yes 🞏 +10pts No 🞏 0 pts*Attach a document which is not older than 3 months.* | Have you ever participated in Erasmus+ mobility previously? If yes, how many?Yes 🞏 -10 pts (each) No 🞏 0 pts |
| **COMMITMENT*I certify that the information given in this application is true, complete, and accurate to the best of my knowledge.*** |
| *I certify that the information given in this application is true, complete, and accurate to the best of my knowledge.* |
| **Student** | **Erasmus coordinator at home university** |
| **Name-Surname:** | **Name-Surname:** |
| **Signature/Date:** | **Signature/Date/Stamp:** |