

SOCRATES/ERASMUS PROGRAMME

ERASMUS INTENSIVE LANGUAGE COURSES 2006-07

Countries involved: *Belgium (Flemish Community); Bulgaria; Cyprus; Czech Republic; Denmark; Estonia; Finland; Greece; Hungary; Iceland; Italy; Latvia; Lithuania; Malta; the Netherlands; Norway; Poland; Portugal; Romania; Slovakia; Slovenia; Sweden; Turkey.*

STUDENT APPLICATION FORM:

1. *to be filled in electronically;*
2. *to be submitted by e-mail by the student to his/her university Erasmus office, no later than <date to be specified by the university>;*
3. *if accepted, to be endorsed by the university's Erasmus contact person;*
4. *to be forwarded by e-mail by the university Erasmus office to the EILC host institution.*

The organising institution will carry out selection of students and inform each applicant and his/her home university of the final selection.

• **STUDENT PERSONAL DATA**

- Family name	
- First name	
- Sex (M =Male; F = Female)	
- Date of birth	
- Nationality	
- Personal E-mail address (or fax n° if the e-mail is not available)	E-mail:@..... (Fax:)
- Additional E-mail address to be used in case of need (e.g. Erasmus office address, etc.)	E-mail:@.....

• **OTHER PERSONAL INFORMATION**

- Current address (valid until .././.)	Street: City: Postal code: Country:
- Tel n° of current address	+.../...../.....
- Summer address (valid until .././.)	Street: City: Postal code: Country:
- Tel n° of summer address	+.../...../.....

• **HOME INSTITUTION**

COUNTRY:.....

- Name and Erasmus code	
- Faculty/Department	
- Erasmus Contact person (Name/Surname)	
- E-mail/Tel./Fax of Contact person	E-mail:@..... Tel. : +.../.../..... Fax: +.../.../.....

• **ERASMUS HOST INSTITUTION**

COUNTRY:.....

- Name and Erasmus code	
- Faculty/Department	
- Erasmus Contact person (Name/Surname)	
- E-mail/Tel./Fax of Contact person	E-mail:@..... Tel. : +.../.../..... Fax: +.../.../.....

• **ERASMUS STUDY PERIOD**

- Number of months of Erasmus period	
- Starting date of Erasmus period	.../.../....
- Area code of your studies (please refer to the macro area code; e.g.: 04)	

• **LANGUAGE COMPETENCE**

- Language of receiving Institution	
- Level of competence I (beginner); II (intermediate)	

• **REQUESTED EILC COURSES**

	<i>Organising institution</i>	<i>Date (from...to...)</i>
- First choice		
- Second choice		

I confirm that the information provided in this application is true and accurate. In case I have to withdraw from the course, I will inform my Erasmus office as soon as possible, and no later than <data to be specified by the home institution>.

Student's confirmation (full name and surname)

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Date:.....

I endorse this application on behalf of my University. Erasmus contact person's full name

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Date:.....

Confirmation by the course organiser of the student's admission to a course should be sent to the following address:

<to be filled in by the home institution>

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