**ONDOKUZ MAYIS UNIVERSTY**

**ERASMUS+ KA 1: LEARNING MOBILITY OF INDIVIDUALS**

**STUDENT MOBILITY FOR STUDIES**

**STUDENT APPLICATION FORM**

**Application deadlines:**

# Autumn Semester: 15 July

# Spring Semester: 15 November

**(Photograph)**

**ACADEMIC YEAR 20…/20…**

**FIELD OF STUDY**: .........................................................

**This application should be completed in BLACK in order to be easily copied, faxed or e-mailed.**

|  |
| --- |
| **SENDING INSTITUTION**  Name and full address: ......................................................................................................................................  ............................................................................................................................................................................  Department coordinator - name, telephone, fax and e-mail………………… ..................................................  ............................................................................................................................................................................  ............................................................................................................................................................................  Institutional coordinator - name, telephone, fax and e-mail………………… ..................................................  ............................................................................................................................................................................  ............................................................................................................................................................................ |

**STUDENT’S PERSONAL DATA**

*(to be completed by the student applying)*

|  |  |
| --- | --- |
| Family name: .......................................................  Date of birth: .......................................................  Sex: .....................................................................  Nationality:..........................................................  Place of Birth: .....................................................  Current address: ..................................................  ..............................................................................  ..............................................................................  ..............................................................................  Current address is valid until: .............................  Tel.: .....................................................................  Fax:…………………………………………….  E-mail: (this is essential)………………………  ………………………………………………… | First name (s): .................................................................  Permanent address (if different): ....................................  ..........................................................................................  ..........................................................................................  ..........................................................................................  .......................................................................................... |

**LIST OF INSTITUTIONS WHICH WILL RECEIVE THIS APPLICATION FORM (in order of preference):**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Institution |  | Country | Period of study  from to | | Duration of stay (months) | N° of expected ECTS credits |
| 1. ........................................  2. ........................................  3. ........................................ | | .....................  .....................  ..................... | .............  .............  ............. | ...........  ...........  ........... | ...................  ...................  ................... | ........................................  ........................................  ......................................... |

|  |
| --- |
| Name of student: ...............................................................................................................................................  Sending institution:  ............................................................................................. Country: .............................................................. |

|  |
| --- |
| Briefly state the reasons why you wish to study abroad ?  ...........................................................................................................................................................................  ............................................................................................................................................................................  ............................................................................................................................................................................  …………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………… |

**LANGUAGE COMPETENCE**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Mother tongue: ................... Language of instruction at home institution (if different): .................................. | | | | | | |
| Other languages | I am currently studying this language | | I have sufficient knowledge to follow lectures | | I would have sufficient knowledge to follow lectures if I had some extra preparation | |
|  | yes | no | yes | no | yes | no |
| ..........................  ..........................  .......................... | 🞏  🞏  🞏 | 🞏  🞏  🞏 | 🞏  🞏  🞏 | 🞏  🞏  🞏 | 🞏  🞏  🞏 | 🞏  🞏  🞏 |

**WORK EXPERIENCE RELATED TO CURRENT STUDY (if relevant)**

|  |  |  |  |
| --- | --- | --- | --- |
| Type of work experience  ..............................................  .............................................. | Firm/organisation  .............................................  ............................................. | Dates  .............................  ............................. | Country  .......................................  ....................................... |

**PREVIOUS AND CURRENT STUDY**

|  |
| --- |
| Diploma/degree for which you are currently studying: ....................................................................................  Number of higher education study years prior to departure abroad: ................................................................  Have you already been studying abroad ? Yes 🞏 No 🞏  If Yes, when ? at which institution ? .................................................................................................................  **The attached Transcript of records includes full details of previous and current higher education study. Details not known at the time of application will be provided at a later stage.** |

|  |
| --- |
| Do you wish to apply for a mobility grant to assist towards the additional costs of your study period abroad? Yes 🞏 No 🞏 |

|  |  |  |
| --- | --- | --- |
| **RECEIVING INSTITUTION** | | |
| We hereby acknowledge receipt of the application, the proposed learning agreement and the candidate’s Transcript of records. | | |
| The above-mentioned student is 🞏  🞏  Departmental coordinator’s signature  ..............................................................................  Date: .................................................................... | | provisionally accepted at our institution  not accepted at our institution  Institutional coordinator’s signature  ..........................................................................................  Date :................................................................................ |
|  |  | |

**Please send to:**

##### Ondokuz Mayıs University

**International Relations Office / Erasmus Office**

**Atakum - Samsun**

##### 55200 TÜRKİYE

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