**ONDOKUZ MAYIS UNIVERSITY**

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

**STUDENT MOBILITY FOR STUDIES**

**HOUSING AND FIRST CONTACT (BUDDY)**

**APPLICATION FORM**

|  |
| --- |
| **Photo**  **(please attach 2 photos)** |

### This form must be filled in by all students

**1. Personal data**

|  |  |
| --- | --- |
| **First name:** |  |
| **Family name:** |  |
| **Date of birth:** |  |
| **Number of passport:** |  |
| **Tel:** |  |
| **E-mail:** |  |
| **Alternative e-mail:**  **(gmail preferred)** |  |
| **Address:** |  |
| **Home university:** |  |
| **City, country,** |  |
| **Area of study:** |  |

**2. Housing**

|  |  |  |  |
| --- | --- | --- | --- |
| **I would like OMU to arrange accommodation for me** | **Yes** | |  |
| **No, l will make my own arrangements** | |  |
| **If yes, please choose one of the below:**  *Dormitory for boys:*  **Single room 600,00 TL**  **Double room 475,00 Tl per person**  **Room for 3 415,00 TL per person**  **Room for 4 375,00 TL per person**  *Dormitory for girls:*  **Single room 600,00 TL**  **Double room 475,00 Tl per person**  **Room for 3 415,00 TL per person**  **Room for 4 375,00 TL per person** | **Single room**  **Double room**  **Room for 3**  **Room for 4**  **Single room**  **Double room**  **Room for 3**  **Room for 4** | | |
| **Accommodation wanted:** | **From:** | **To:** | |
| **Physical disabilities or other requiring special facilities: (eg. Allergies)** |  | | |
| **Smoker or non-smoker:** |  | | |

**\**You will receive information about housing when you have assigned accommodation.***

**3. First Contact-Buddy (mentor) Programme**

|  |  |  |
| --- | --- | --- |
| ***A First Contact is a student assigned to help you with practical matters once you have arrived in Samsun. Your First Contact can meet you at the airport and show you to your Samsun address.*** | | |
| **Please sign me up for a First Contact:** | **Yes:** |  |
| **No:** |  |
| **Date and time of arrival to Samsun: (If unknown please provide this information as soon as it is finalised)** |  | |
| **Place of arrival to Samsun:** |  | |
| **Flight / bus number:** |  | |

**If you requested a mentor please answer the following questions:**

|  |  |
| --- | --- |
| **What are your hobbies, interests?** |  |
| **Describe yourself in a few sentences….** |  |
| **What do expect from a mentor programme?** |  |
| **Please provide information about the student bodies you are affiliated to?** |  |

**4. Signature of applicant**

|  |  |
| --- | --- |
| **Date:** | **Signature:** |

#### Please complete this form in BLOCK LETTERS and send it with other required forms to:

**Ondokuz Mayıs University**

**International Relations Office / Erasmus Office**

**Atakum - Samsun**

**55200 TURKEY**

**Fax: +90-362-4576091**

**Phone: +90-362-3121919 (Ext. 1613)**

**E-mail:** [**erasmus@omu.edu.tr**](mailto:erasmus@omu.edu.tr)

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