Erasmus+ programme (KA1)

Studies/ Internship in the European Union and other countries or enterprises and organisations

academic year 2024-2025

**APPLICATION FORM**

**1. Personal data**

|  |  |  |
| --- | --- | --- |
| **Photo** | Name: |  |
| Surname: |  |
| Personal ID code: |  |
| Address (street, house number, city, postal code): |  |
| Telephone: |  |
| E-mail address: |  |

**2. Studies at LBTU**

|  |  |
| --- | --- |
| Faculty: |  |
| Study programme: |  |
| Year: |  |

**3. Planned Erasmus+ mobility**

|  |  |
| --- | --- |
| Studies |  |
|  |  |
| Internship |  |

**4. Preferred university/ enterprise abroad in order of preference** (must be chosen from institutions LBTU has an interinstitutional agreement with):

|  |  |  |  |
| --- | --- | --- | --- |
| **No** | **Country** | **University** | **Enterprise/ Organisation** |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |

**5. Planned study period abroad:**

|  |  |
| --- | --- |
| Autumn semester |  |
|  |  |
| Spring semester |  |
|  |  |
| Full academic year |  |

**6. Planned internship period:**

|  |  |
| --- | --- |
|  |  |

Month, year No. of months

**7. Language of instruction in the foreign university/ enterprise**

**8. Foreign language skills**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  | Excellent |  | Advanced |  | Intermediate |  | Elementary |
|  |  |  |  |  |  |  |  |
|  |  |  | Excellent |  | Advanced |  | Intermediate |  | Elementary |
|  |  |  |  |  |  |  |  |
|  |  |  | Excellent |  | Advanced |  | Intermediate |  | Elementary |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

I have previously participated in LLP/ERASMUS or ERASMUS+ programme:

Yes Studies No

Internship

If yes please specify:

|  |  |
| --- | --- |
| Country |  |
| University/ Enterprise |  |
| Period of studies/ internship |  |
| No. of months |  |

Date:

|  |
| --- |
|  |
| Student’s signature |

I confirm that the information provided above is correct:

External relations coordinator in the faculty:

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Name, Surname |  | Signature |