



# BABEŞ-BOLYAI UNIVERSITY CLUJ-NAPOCA

CENTRE FOR INTERNATIONAL COOPERATION

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# Erasmus+

### Erasmus+ with partner countries

## STUDENT APPLICATION FORM

**Photograph**

**ACADEMIC YEAR 2019/2020**

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

Please fill in this application with a black pen in order to be easily copied and/or faxed. You are kindly asked to fill in all the fields!

### STUDENT'S PERSONAL DATA

*(to be completed by the student applying for the Erasmus<sup>+</sup> grant)*

Permanent address (if different):

Citizenship: .....

Family name: .....

Sex: .....

Date of birth: .....

Place of Birth: .....

Current address: .....

.....

.....

Current address is valid until: .....

.....

First name(s): .....

Level of study: Bachelor  Master  Ph D

E-mail address: .....

.....

Telephone.....

Passport Nr. and date of issue:.....

.....

### SENDING INSTITUTION:

Name and full address (Street Number, City, Country)

.....

.....

Erasmus coordinator (name, telephone and fax numbers, e-mail)

.....

.....

### 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

English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**PREVIOUS AND CURRENT STUDY**  
 Have you ever been an Erasmus student before? Yes      or      No   
 Number of months:                      Year of mobility:                      Host  
 university:

Briefly state the reasons why you wish to study abroad  
 .....  
 .....  
 .....

**ERASMUS STUDENT NETWORK CLUJ-NAPOCA**  
 Do you want to be assisted by an ESN tutor?  
 Yes       I agree to provide to ESN Cluj-Napoca my email contact!  
 No

**RECEIVING INSTITUTION**  
 We hereby acknowledge receipt of the application, the proposed learning agreement and the candidate's letter of confirmation.  
 The above-mentioned student is                       provisionally accepted at our institution Institutional Coordinator: .....  not accepted at our institution  
 Signature: .....      Date :.....

- You are requested to send also:
- Photocopy of your passport (page with your personal information) / ID card (if you are EU citizen);
  - Learning Agreement signed by your Erasmus departmental and institutional coordinators;
  - 2 passport size photos.

- Deadlines for submitting the necessary documents for academic enrollment:
- Academic year 2019/2020: ..... July 15, 2019
  - Academic year 2019/2020– first semester: ..... July 15, 2019
  - Academic year 2019/2020– second semester: ..... December 15, 2019 (may be extended)

The requested documents must be sent by email **AND in original by postal service** to:

**Iiona Dranca**  
 UNIVERSITATEA BABEȘ-BOLYAI  
 Office for Community Programs Centre  
 for International Cooperation str.  
 Avram Iancu, nr. 68  
 RO-40 0083 Cluj-Napoca  
 ROMANIA

Date:

Student signature: