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| ...............................................................  Name and surname:  Student ID No ……………………………….  Level of studies…………semester.........……..  Field of studies .........................................................  Specialization …………………………………..  Email ………………………………@student.put.poznan.pl | Poznań, .................... 20…  Erasmus+ Programme Coordinator  in the Institute of ……………………..  …………………………………… |

Erasmus+ Programme Application Form

Please consider me an applicant for the Erasmus/Erasmus+ programme in the academic year 20..…/20…...

Partner university: ……………………………………………………………………………………………………

Planned period abroad: from ……………………………….. to ………………………………..

Planned period abroad (in months): ………….

I hereby declare that in the previous years\*

□ I have not participated in the Erasmus/Erasmus+ programme

□ I have participated in the Erasmus/Erasmus+ programme

* + I have participated in the Erasmus/Erasmus+ programme as part of my: □ first-cycle studies, □ second-cycle studies,
  + In the form of: □ studies, □ internship.

I hereby declare that\*

□ I do not receive scholarship

□ I receive scholarship □ social, □ disability.

…………………………………………………….

Student's signature