



Academic year:

____/____

**ERASMUS+ MOBILITY
STUDENT APPLICATION FORM**

PERSONAL DATA	
Family name:	
First name(s):	
Date and place of birth:	
Nationality:	
Student ID number:	
Current address:	
Permanent address (if different):	
Telephone number:	
Email address:	

ADDITIONAL INFORMATION ABOUT STUDENT'S MOBILITY	
LINGUISTIC COMPETENCE (language – level of fluency)	



<p>EXPERIENCE STUDYING ABROAD</p> <p>(institution / year/ duration)</p>	
<p>INTERNSHIP ABROAD</p> <p>(institution / year/ duration)</p>	
<p>SPECIAL NEEDS (regarding inclusion and diversity – as defined by Erasmus+ Programme Guide p.7- 8 https://erasmus- plus.ec.europa.eu/sites/default/fil es/2023- 01/ErasmusplusProgramme- Guide2023-v2_en.pdf)</p>	

I wish to apply for:

(type of mobility / duration / student's motivation)

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I hereby confirm that I have read all the criteria, rules, FAQs and conditions for participation in the Erasmus+ Programme and that I accept them.

Potwierdzam, iż zapoznałam / zapoznałem się ze wszystkim kryteriami, zasadami, najczęściej zadawanymi pytaniami i warunkami uczestnictwa w Programie Erasmus+ oraz iż je akceptuję.

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Applicant's signature

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Date

The application needs to be sent to: erasmus@wsi.edu.pl