**EFFECTUS University of Applied Sciences**

**INTERNATIONAL INGOING STUDENT APPLICATION FORM**

**ERASMUS + PROGRAMME**

**YEAR 202..../202...**

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| photo | **NAME:** |
| **SURNAME:** |
| **SEX: F M** |
| **DATE OF BIRTH:** |
| **PLACE OF BIRTH:** |
| **NATIONALITY:** |
| **ID / PASSPORT NO.:** |
| **E-MAIL:** |
| **PHONE:** |
| **CURRENT ADDRESS:** |  |
| **CITY:** |  |
| **POSTAL CODE:** |  |
| **COUNTRY:** |  |

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| **SENDING INSTITUTION:** |  |
| **ERASMUS ID:** |  |
| **ADDRESS:** |  |
| **WEBPAGE:** |  |
| **FIELD OF STUDY:** |  |
| **YEAR OF STUDY:** |  |
| **INFORMATION ABOUT ERASMUS COORDINATOR** | **NAME AND SURNAME:** |
| **CONTACT:** |
| **E-mail:** |

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| **RECEIVING INSTITUTION** | **EFFECTUS University of Applied Sciences** |
| **ERASMUS ID:** | **HR ZAGREB12** |
| **ADDRESS:** | **Trg J.F. Kennedy 2, 10 000 Zagreb, Croatia** |
| **WEBPAGE:** | **https://effectus.com.hr/** |
| **INFORMATION ABOUT ERASMUS COORDINATOR** | **Name: Klara Dumbović, mag.oec.** |
| **Tel: +385 1 611 77 77** |
| **E-mail:** **erasmus@effectus.com.hr** |

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| **I AM INTERESTED IN ERASMUS DURING:** 1. **winter semester**
2. **summer semester**
3. **both**
4. **PLEASE WRITE DOWN THE EXACT DATES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
 |
| **PLEASE CHOOSE YOUR NATIVE LANGUAGE AND/OR** **LANGUAGES YOU ARE FLUENT IN:** |
| **1. English** **2. German** **3. Italian** **4. Spanish****5. French****OTHER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

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| **TELL US WHY WOULD YOU LIKE TO STUDY AT EFFECTUS UNIVERSITY?** **WHAT ARE YOUR EXPECTATIONS FROM ERASMUS + MOBILITY PROGRAMME?** **EXPLAIN IN MAX. 250-350 WORDS.** |

**PLEASE ATTACH: 1. YOUR TRANSCRIPT OF RECORDS, 2. COPY OF YOUR PASSPORT AND 3. ENGLISH LANGUAGE CERTIFICATE (level B1 or B2) TO THIS APPLICATION FORM.**

**DATE : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**APPLICANT SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **SENDING INSTITUTION - ERASMUS CODE** **Name of the Institution****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Erasmus Coordinator (name, telephone, fax, e-mail)****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*****Herby I certify that the above mentioned student has been nominated by sending institution for ERASMUS exchange programme and that the information provided on this paper is true and correct.*****Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Official stamp of the Institution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |