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**(Photo)**

**DUMLUPINAR UNIVERSITY**

**INCOMING ERASMUS STUDENT APPLICATION FORM**

**ACADEMIC YEAR 20... / 20...**

**FIELD OF STUDY**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

THIS APPLICATION FORM SHOULD BE COMPLETED **ONLINE**; DOCUMENTS FILLED MANUALLY WILL NOT BE ACCEPTED. PLEASE ENCLOSE YOUR TRANSCRIPT OF RECORDS AND LEARNING AGREEMENT TO YOUR APPLICATION.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **STUDENT’S PERSONAL DATA (To be completed by the student applying)** | | | | | | | | | | | | | |
| **Family name** |  | | | | | | **Marital Status** | | | |  | | |
| **First name (s)** |  | | | | | | **Faculty or Department** | | | |  | | |
| **Date of birth (dd/mm/yyyy)** |  | | | | | | **Average Grade of Transcript** | | | |  | | |
| **Place of Birth** |  | | | | | | **Student Number** | | | |  | | |
| **Gender** |  | | | | | | **Semester** | | | |  | | |
| **Nationality** |  | | | | | | **T.C. Identification No (Only for Turkish Citizens)** | | | |  | | |
| **Current address:** | | | | | | | **Permanent address (if different):** | | | | | | |
| **Current address is valid until** |  | | | | | |
| **Tel** |  | | | | | | **Tel** | | | |  | | |
| **Fax** |  | | | | | | **Fax** | | | |  | | |
| **E-mail** |  | | | | | | **E-mail** | | | |  | | |
| **CONTACT PERSON IN EMERGENCY** | | | | | | | | | | | | | |
| **Name and Family Name** | | | |  | | | **Telephone** | | | |  | | |
| **Relationship to the applicant** | | | |  | | | **E-mail** | | | |  | | |
| **Address** | | | |  | | | | | | | | | |
| **LANGUAGE COMPETENCE** | | | | | | | | | | | | | |
| Mother language : \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Language of instruction at home institution (if different): \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | |
| **Other languages** | | **I am currently studying this language** | | | | **I have sufficient knowledge to follow the lectures** | | | | **I need to study further to be able to follow the lectures** | | | |
| **Yes** | | | **No** | **Yes** | | | **No** | **Yes** | | | **No** |
|  | | 🞏 | | | 🞏 | 🞏 | | | 🞏 | 🞏 | | | 🞏 |
|  | | 🞏 | | | 🞏 | 🞏 | | | 🞏 | 🞏 | | | 🞏 |
|  | | 🞏 | | | 🞏 | 🞏 | | | 🞏 | 🞏 | | | 🞏 |
| Diploma/degree for which you are currently studying: | | | | | | | | | | | | | |
| Number of higher education study years prior to departure abroad: | | | | | | | | | | | | | |
| Have you ever studied abroad? Yes 🞏 No 🞏  If Yes, when? List the names of institutions and countries? | | | | | | | | | | | | | |
| Do you have any disability? Yes 🞏 No 🞏  If Yes; Please Describe: | | | | | | | | | | | | | |
| Have you ever been abroad? Yes 🞏 No 🞏  If Yes; In which country: | | | | | | | | | | | | | |
| **STUDY PERIOD** | | | | | | | | | | | | | |
| I’m exchange student in: 1st semester only 🞏 2nd semester only 🞏 Full academic year 🞏 | | | | | | | | | | | | | |
| **Date of Arrival (very important):** | | | | | | | | | | | | | |
| **ACCOMMODATION PREFERENCES** | | | | | | | | | | | | | |
| I need accommodation in the student hostel in Germiyan Campus. (a place in a 8-person bedroom) 🞏 | | | | | | | | | | | | | |
| I need accommodation in the student hostel in Main Campus. (a place in a 2-person bedroom) 🞏 | | | | | | | | | | | | | |
| I will arrange accommodation myself. 🞏 | | | | | | | | | | | | | |
| **Institution** | | | **Country** | | **Period of study**  **(dd/mm/yyyy)** | | | **Duration of stay (months)** | | | | **Expected ECTS credits** | |
| **from** | **to** | |
| Dumlupınar University | | | Türkiye | |  |  | |  | | | |  | |
| I certify that all the information provided in this form is correct and complete to the best of my knowledge.  **Student’s Signature: Date:** | | | | | | | | | | | | | |
| **SENDING INSTITUTION** | | | | | | | | | | | | | |
| **Name and Full Address:**  **Erasmus ID Code:**  **Department Coordinator Information**  **Name:**  **Telephone:**  **Fax:**  **E-mail:**  **Signature:** **Date:** | | | | | | | | | | | | | |
| **Institutional Coordinator Information**  **Name:**  **Telephone:**  **Fax:**  **E-mail:**  **Signature:** **Date and Stamp:** | | | | | | | | | | | | | |
| **RECEIVING INSTITUTION** | | | | | | | | | | | | | |
| **Name and Full Address:** DUMLUPINAR UNIVERSITY  EVLİYA ÇELEBİ KAMPÜSÜ TAVŞANLI YOLU 10. KM. 43100 KÜTAHYA / TÜRKİYE  **Erasmus ID Code:** TR KUTAHYA01  **Department Coordinator Information**  **Name:**  **Telephone:**  **Fax:**  **E-mail:**  **Signature:** **Date:** | | | | | | | | | | | | | |
| **Institutional Coordinator Information**  **Name:** PROF. DR. KAAN ERARSLAN  **Telephone:** +90 274 265 2050 **Fax:** +90 274 265 2133 **E-mail:** iro@dpu.edu.tr  **Signature:** **Date and Stamp:** | | | | | | | | | | | | | |

**First, please send your filled Application Form and confirmed Learning Agreement (LA) to the following e-mail address:** [**iro@dumlupinar.edu.tr**](mailto:iro@dumlupinar.edu.tr)

**Second, post your Application Form and Learning Agreement (LA) to the following address:**

Dumlupınar Üniversitesi

Evliya Çelebi Yerleşkesi Tavşanlı Yolu 10.km

Rektörlük Uluslararası İlişkiler Ofisi

Kütahya, TÜRKİYE

**Applications posted without photograph and signatures will be invalid!**