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**DUMLUPINAR UNIVERSITY**

 **ERASMUS+ STUDENT PLACEMENT**

**APPLICATION FORM**

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

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

THIS APPLICATION FORM SHOULD BE COMPLETED **IN BLACK AND IN CAPITAL LETTERS** IN ORDER TO BE EASILY COPIED, FAXED OR E-MAILED. PLEASE ENCLOSE YOUR LETTER OF INTENTION AND TRANSCRIPT OF RECORDS AND/OR ANY OTHER INFORMATION THAT MAY ENHANCE YOUR APPLICATION.

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| --- |
| **SENDING INSTITUTION** |
| **Name and Full Address:** DUMLUPINAR UNIVERSITYEVLİYA ÇELEBİ KAMPÜSÜ TAVŞANLI YOLU 10. KM. 43100 KÜTAHYA / TÜRKİYE **Erasmus ID Code:** TR KUTAHYA01 |
| **Department Coordinator Information** **Name:** **Telephone:****Fax:** **E-mail:** |
| **Institutional Coordinator Information****Name:** PROF. DR. MEHMET TEVFİK BAYER**Telephone:** +90 274 265 2031 **Fax:** +90 274 265 2133 **E-mail:** iro@dumlupinar.edu.tr |
| **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** |  |
| **THE INSTITUTIONS WHICH YOU WILL APPLY:** |
| **Institution** | **Country** | **Period of study****(dd/mm/yyyy)** | **Duration of stay (months)** |
| **from** | **to** |
|  |  |  |  |  |
|  (Please enclose further information document about institution) |
| **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 conduct my training** | **I need to study further to be able to conduct my training** |
| **Yes** | **No** | **Yes** | **No** | **Yes** | **No** |
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| **WORK EXPERIENCE RELATED TO CURRENT STUDY (if relevant)** |
| **Type of work experience** | **Firm/organization** | **Dates** | **Country** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **PREVIOUS AND CURRENT STUDY** |
| Diploma/degree for which you are currently studying:  |
| 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: |
| **BRIEFLY STATE THE REASONS WHY YOU WISH TO STUDY ABROAD?** |
|  |
| I certify that all the information provided in this form is correct and complete to the best of my knowledge. Student’s Signature: Date (dd/mm/yyyy): |

**Students must submit original forms to their related Departmental Coordinators and a copy of the original forms to International Relations Office before deadline.**

**Applications without photograph and signature will be invalid!**