|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **APPLICATION FORM FOR STUDIES** | | | | |
| Departmental Level [FA PUT] of Erasmus+ Recruitment Process | | | | |
|  | | | | |
| *Please fill in ALL blanks in capital letters. Print both sides of the document.* | | | | |
|  | | | | |
| **The Student** | | | | |
| Last Name (s): |  | First Name (s): |  | |
| Current Semester: |  | Student ID no: |  | |
| Date of Birth: |  | Place of birth: |  | |
|  | | | | |
| Have you already been a beneficent of Erasmus+ Program?: | YES / NO | Years of participation: |  | |
| University: |  | |
|  | | | | |
| **Contact Data** | | | | |
| E-mail address\*: |  | | | |
| Phone number: |  | | | |
| *\*Please note that the only e-mail accepted for professional contact with the Faculty of Architecture [PUT] is an official address in a domain* ***student.put.poznan.pl*** | | | | |
|  | | | | |
| **The Receiving Institution: list of Student’s preferences** | | | | |
|  | Name of Partner University | | Country | |
| The First Choice |  | |  | |
| The Second Choice |  | |  | |
| The Third Choice |  | |  | |
|  | | | | |
| **Additional Information** | | | | |
| First Type: |  | | | |
| *The official language Certificate. Please enclose a copy.* | | | | |
| Second Type: |  | | | |
| *Social activities for the PUT or FA community and volunteering. Please enclose a copy.* | | | | |
| Third Type: |  | | | |
| *Scientific Activity/Recognized achievements in PUT sport clubs. Please enclose a copy.* | | | | |
|  | | | | |
| **Student’s Commitment** | | | | |
| Student’s Signature: | |  | | |
| Date: | |  | | |
| *NOTE: The reverse is to be filled by Departmental Recruitment Committee* | | | | |
| **DECISION** | | | | |
| *To be filled by Departmental Recruitment Committee* | | | | |
|  | | | | |
| **Records Data** | | | | |
| Average grade: |  | Additional Points: |  | |
| Overall result: |  | Position: |  | |
| Student has already been a beneficent of Erasmus+ Program. | | | 🞏 Yes | 🞏 No |
|  | | | | |
| **The Departmental Recruitment Committee Decision** | | | | |
| 🞏 Qualified | | 🞏 Not qualified | | |
| Reason of denial: |  | | | |
|  | | | | |
| **Commitment of The Committee** | | | | |
| Departmental Coordinator  Stamp & Signature: |  | Vice-Dean  Stamp & Signature: |  | |
| Date: |  | Date: |  | |