Wrocław, date …………

|  |  |
| --- | --- |
| Name and surname: |  |
| phone: |  |
| e-mail: |  |
| field of studies, year:  |  |
| Certificate of disability: | yes[[1]](#footnote-1) □ no □ |
| Maintenance scholarship:  | yes[[2]](#footnote-2) □ no □ |

Institutional Coordinator

of Erasmus+ Programme

Application

Please qualify me to go to practice within the Erasmus+ programme in the academic year 20 .... / 20 .... to (please indicate the name of the university/host institution[[3]](#footnote-3)):

1. Offer of the university:

a) ……………………….

b) ……………………….

c) ……………………….

1. Place found yourself:

a) Germany: □

b) France: □

c) other countries: □

 …..………………………

(signature)

1. Please attach a certificate. [↑](#footnote-ref-1)
2. Please attach a certificate. [↑](#footnote-ref-2)
3. Students looking for internships alone are required to provide a letter of intent. [↑](#footnote-ref-3)