



ÇANAKKALE ONSEKİZ MART UNIVERSITY

Can you please add
an ID picture of
yours?

Incoming Student's Application Form

| | |
|--|---|
| Academic Year | |
| Term | <i>Winter? Spring? Full Academic Year?</i> |
| Field of studies | |
| Degree | <i>Bachelor's Degree? Master's Degree? Doctorate?</i> |
| Which year of your Degree are you in? (e.g. second year of your Bachelor's Degree, first year of your Master's Degree et cetera) | |

STUDENT'S PERSONAL DATA

| | |
|---|---|
| Name/s | |
| Surname/s | |
| Date and place of birth | |
| Nationality | |
| Current address | |
| Permanent address (if different) | <i>If you do not use this space, you can delete it!</i> |
| Email address | |
| Mother's name/surname | |
| Father's name/surname | |
| Contact person in case of emergency (name, surname, mobile phone and home number, email) | |

SENDING INSTITUTION

| | |
|--|--|
| Name in English | |
| Name in Original Language | |
| University address | |
| Erasmus Code | |
| Institutional Erasmus Coordinator (name and surname, office number, fax, email) | |
| Departmental Erasmus Coordinator (name and surname, office number, fax, email) | |

RECEIVING INSTITUTION

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|--|
| In Çanakkale Onsekiz Mart University, which will be your Faculty/Department? |
| |

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|--|
| Why have you chosen our University for your Erasmus+ Mobility Programme? |
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|--|

KNOWLEDGE OF FOREIGN LANGUAGES

| | | | | | | |
|--|---------------------------------------|----|---|----|---|----|
| Mother tongue: Language of instruction in your home University: | | | | | | |
| Other languages | I am currently studying this language | | I have sufficient knowledge to join classes | | I could join the classes with some extra language lessons | |
| | yes | no | yes | no | yes | no |
| English | | | | | | |
| Turkish | | | | | | |
| <i>Others?</i> | | | | | | |

WORK/STAGE EXPERIENCE RELATED TO YOUR CURRENT STUDIES (if you think they are relevant)

| Type of experience | Work/Stage place | Period of time | Country |
|--------------------|------------------|----------------|---------|
| | | | |
| | | | |

SIGNATURES

Student's signature: _____ Date: _____

| | |
|---|--|
| SENDING INSTITUTION | |
| I hereby confirm that the above-mentioned student has been selected as a participant in the Erasmus+ Programme. | |
| Institutional Erasmus Coordinator's signature: _____ | |
| Date: _____ | |

| | |
|--|---|
| RECEIVING INSTITUTION | |
| We hereby confirm the acceptance of your student in our Institution for her/his Erasmus+ Mobility Programme. | |
| Departmental Erasmus Coordinator's name: _____ Signature: _____ Date: _____ | Institutional Erasmus Coordinator's name: _____ Signature: _____ Date: _____ |