

APPLICATION FORM FOR ERASMUS+ STUDENT MOBILITY FOR TRAINEESHIPS MOBILITY FOR HIGHER EDUCATION

Kindly note that handwritten applications are not accepted.

The information provided in this form shall be processed in accordance with all applicable data protection legislation, including the provisions of the Data Protection Act and the General Data Protection Regulation, for Saint Martin's Institute of Higher Education to assess your application and suitability for mobility under the Erasmus+ Programme.

PERSONAL DETAILS

Last Name:

First Name:

SM No:

Course:

Current Year:

LANGUAGE COMPETENCE

Mother Tongue:

Other Languages:

A1 A2 B1 B2 C1 C2
A1 A2 B1 B2 C1 C2
A1 A2 B1 B2 C1 C2

*Common European Framework of Reference for Languages see
<http://europass.cedefop.europa.eu/en/resources/european-language-levels-cefr>*

EQUITY AND INCLUSION

Applicants with special needs may be entitled to extra financial support.

I am an applicant with special needs (physical, mental or health-related conditions)

Yes No

Applicant Declaration

I,
information I have submitted in this form is accurate.

the undersigned, confirm that the

Signature in blue ink:

Date: