

# Ministero dell'Università e della Ricerca Alta Formazione Artistica e Musicale











### **ERASMUS+ INCOMING STUDENT APPLICATION FORM**

(For Long-Term Study or Traineeship Mobility)

### 1. PERSONAL INFORMATION

Surname:
First name:
Date of birth (DD/MM/YYYY):
Nationality:
Gender: ☐ Male ☐ Female ☐ Other
Email:
Phone number (with country code):
Permanent address:
• City: Postcode:
Country:
2. SENDING INSTITUTION
Name of Institution:
Erasmus Code:
Institutional Coordinator:
Name:
• Email:
Departmental Coordinator:
Name:
Email:

## 3. MOBILITY INFORMATION Type of mobility (please tick): ☐ Study Mobility (min. 4 months) ☐ Traineeship Mobility (min. 4 months) Proposed period of mobility: Start date: \_\_\_\_\_ End date: \_\_\_\_\_ Field of study / Instrument: \_\_\_\_\_ Current year of study: 4. LANGUAGE SKILLS Mother language: Language of instruction at home institution: Other languages known: - \_\_\_\_\_ □ Basic □ Intermediate □ Advanced - \_\_\_\_\_ ☐ Basic ☐ Intermediate ☐ Advanced 5. REQUIRED DOCUMENTS (attach to email) ☐ Learning Agreement (only via EWP Dashboard) ☐ Motivation Letter ☐ Transcript of Records ☐ Curriculum Vitae (CV) ☐ Copy of ID / Passport ☐ Audio/video recording (performance students only)

#### 6. STUDENT'S DECLARATION

I hereby declare that the information provided in this application is true and correct. I understand that incomplete applications or those sent after the deadline will not be considered.

Place and Date:			 _
Signature of the	. 1 .		

### PLEASE SEND THIS FORM AND ALL DOCUMENTS IN ONE EMAIL TO:

erasmus@conservatoriolecce.it

To facilitate processing, please name the file as follows: Last name, First name, Instrument or Subject, BA or MA, Erasmus code of the sending conservatory: (e.g., Roberto\_Rossi\_Piano\_MA\_ILECCE 03). Please also include links to video recordings in the email body.

The application **deadline** is set for **Friday**, **June 15th**. Applications submitted after the deadline or through other channels will be excluded.