



IONIAN UNIVERSITY
L.L.P. / ERASMUS PROGRAM
Academic year 2011 – 12
[Registration Application Form](#)



Εκπαίδευση και Πολιτισμός
Πρόγραμμα Δια Βίου Μάθησης Erasmus

To be returned to :

**Ionian University, International Relations Dept.
Rizospaston Voulefton, 7 GR – 49100 CORFU**

Information : Mrs. Denise KARVOUNI

Tel. : +30 26610 87130

Fax: +30 26610 87184

E-mail: eras-inc@ionio.gr

Surname				
Name				
Date of birth		Male		Female
Nationality				
Home address	street			
	city			
	postcode			
	country			
Tel.				
Fax				
E-mail				
Sending institution				
Department/code				
Name of home coordinator				

Proposed period of study	Autumn semester		Spring semester	
Department(s) proposed to study in at the Ionian University				
Arrival date				
Departure Date				
Students' ability in Greek language	Beginner			
	Intermediate			
	Advanced			
Date	Signature of applicant			

Confirmation of Ionian University:

Corfu,

Departmental coordinator's signature



IONIAN UNIVERSITY
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Accommodation Application Form



Εκπαίδευση και Πολιτισμός
Πρόγραμμα Δια Βίου Μάθησης Erasmus

To be returned to :
Ionian University, Accommodation Office
Rizospaston Vouleifton, 7 GR – 49100 CORFU

Mr. Marinos MOUZAKITIS
Tel. : +30 26610 87637
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Surname					
Name					
Date of birth		Male		Female	
Nationality					
Home address	street				
	city				
	postcode				
	country				
Tel.					
Fax					
E-mail					
Sending institution					

Proposed period of study	Autumn semester		Spring semester	
Department(s) proposed to study in at the Ionian University				
Arrival date				
Departure Date				
Date	Signature of applicant			