

ERASMUS

Student Application Form

20__ / __

HOST INSTITUTION: POLYTECHNIC INSTITUTE OF SETUBAL (P SETUBAL01)

Original
Photo

I. Sending institution

Name and ERASMUS code:	_____
Address:	_____
Contact person:	_____
E-mail:	_____
Fax:	_____
Phone n.:	_____

II. Student Personal Information

First name:	_____	Family name(s):	_____
Birth date:	_____ / _____ / _____	(dd / mm / yyyy)	
Male	_____	Female	_____
ID/ passport n.:	_____		
E-mail:	_____		
Portuguese Phone n. (to be filled when arriving):	_____		
Emergency contact person			
Name:	_____		
Relationship with student:	_____	Phone n.:	_____
E-mail:	_____		
Foreign language level			
English	Very good _____	Good _____	Fair _____
Portuguese	Very good _____	Good _____	Fair _____
Other: _____	Very good _____	Good _____	Fair _____

* Do you allow us to provide your e-mail address to other students (ERASMUS and Portuguese students)?

III. Mobility Information

Field of study:	_____		
Degree year at home Institution:	1 st Cycle – 1 st year <input type="checkbox"/> 2 nd year <input type="checkbox"/> 3 rd year <input type="checkbox"/>		
	Masters – 1 st year <input type="checkbox"/> 2 nd year <input type="checkbox"/>		
Winter semester	_____	Spring semester	_____
Both	_____		
Mobility dates:	_____	Mobility dates:	_____
	_____	Mobility dates:	_____

Date: _____ / _____ / _____ (dd / mm / yyyy)

Student's signature _____