

**Erasmus Plus KA1 Call: Student Mobility for Traineeships**

**Academic Year 2020/21**

**APPLICATION FORM**

|  |
| --- |
| **passport photo** |

Space reserved for the International

Programs Office

Application handed in on

……./……./2021

**PERSONAL DATA**

Last name............................................................First name..................................................... Gender: M/F

Place of birth ...................................... Prov. (…...) Nation .................................................................

Date of birth................... …............................. Nationality.....................................................................

Resident at ...................................... Prov. (…..) Postal Code...........Street................................................................

tel. ...../...................................... mobile phone ....................................... email:.........................................................................

Tax code ......................................................................................................................................

Resident in (do not repeat if same as residence) ..............................................Prov. (....) Postal Code

Street......................................................................................................................................................

Emergency contact person .....................................tel..../...............................................

**I AM APPLYING FOR A MOBILITY TRAINEESHIP AT**

(indicate period, institution and location of the traineeship, city, country)

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Availing myself of the right granted by Article 2 of Law No 15 of 4 January 1968 and subsequent amendments and additions, and of Article 46 of Presidential Decree No 445 of 28 December 2000, and aware that in the event of false declarations the penalties laid down by the criminal code and by the special laws on the subject will be applied to me (Article 76 of Presidential Decree No 445/2000) and that I will forfeit any benefits that may have been obtained

**I hereby declare**

- to be up-to-date with the payment of university fees for enrolment in the University of Bergamo for the academic year 2019-20

***or***

- to be enrolled in academic year 2019-20 and that I do not have to pay university fees for the 2020-21 academic year, as I will graduate in the month of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, knowing that I will have to regularise my enrolment for the 2020-21 academic year if I do not graduate by the deadline.

- to be enrolled in the Department of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Degree Course

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

☐ Bachelor’s **□** Master’s ☐ Single-cycle Master's

Curriculum\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enrolled in year (I, II

etc…)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ □ in progress □ outside prescribed time □ undergraduate

**Matriculation no.**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

no. of exams taken/CFU credits (including those not yet recorded in the student's career)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* I took the following exams that have not yet been recorded:
  + Subject\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ code \_\_\_\_\_\_\_\_\_\_held on

(date)\_\_\_\_\_\_mark\_\_\_\_\_\_\_\_CFU\_\_\_

* + Subject\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ code \_\_\_\_\_\_\_\_\_\_held on

(date)\_\_\_\_\_\_mark\_\_\_\_\_\_\_\_CFU\_\_\_

* + Subject\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ code \_\_\_\_\_\_\_\_\_\_held on

(date)\_\_\_\_\_\_mark\_\_\_\_\_\_\_\_CFU\_\_\_

* + Subject\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ code \_\_\_\_\_\_\_\_\_\_held on

(date)\_\_\_\_\_\_mark\_\_\_\_\_\_\_\_CFU\_\_\_

* + Subject\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ code \_\_\_\_\_\_\_\_\_\_held on

(date)\_\_\_\_\_\_mark\_\_\_\_\_\_\_\_CFU\_\_\_

- to have knowledge of the following foreign languages

* ENGLISH level - □ A1 □ A2 □ B1 □ B2 □ C1 □ C2
* FRENCH level - □ A1 □ A2 □ B1 □ B2 □ C1 □ C2
* SPANISH level - □ A1 □ A2 □ B1 □ B2 □ C1 □ C2
* GERMAN level - □ A1 □ A2 □ B1 □ B2 □ C1 □ C2
* PORTUGUESE level - □ A1 □ A2 □ B1 □ B2 □ C1 □ C2
* NORWEGIAN level - □ A1 □ A2 □ B1 □ B2 □ C1 □ C2
* Others:

- to have obtained the language certificate (indicate the language and level):

language of traineeship\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

level - □ A1 □ A2 □ B1 □ B2 □ C1 □ C2 - grade \_\_\_\_\_\_\_\_\_\_\_ exam date:\_\_\_\_\_\_\_\_\_\_\_\_\_

**( )** computerised language test at the Language Competence Centre of UNIBG (attached)

**( )** other (valid official certifications from outside the University)

**( )** university language exam taken as part of your study plan

**( )** I declare that I do not have any certification, that I was not able to take the computerised language test due to lack of available dates (in this case please attach a self-certification of your language knowledge indicating the B1 or B2 level)

OR

**( )** to be exempt from certification as I am enrolled in a Master's degree course in English and intend to do my traineeship in English

- to have already received an **Erasmus+ mobility grant for studies and/or traineeship:**

academic year\_\_\_\_\_\_\_\_\_for the period from \_\_\_\_\_\_\_\_\_\_ to\_\_\_\_\_\_\_\_\_\_, for a total of no.\_\_\_\_grant-months

at the University.................................................................................................................

- to have participated in further learning/training experiences abroad:

(indicate Country, duration, type of community programme/agreement)

1. ..............................................................................

2. ..............................................................................

3. ..............................................................................

- to undertake not to receive any other Community funding during the duration of the placement, in conjunction with the mobility grant for the purpose of the traineeship

- to undertake, in the case of blended mobility, to keep the travel documents and hand them in at the end of the traineeship together with the traineeship logbook.

Date..........................................Location.................................... Signature .............................................

Attachments:

**( ) Curriculum Vitae** in European format in Italian **and** in the language of the country where the traineeship is to be carried out **or** in English;

**( ) Cover letter/motivation letter** (one A4 page maximum) written in Italian **and** in the language of the country where you intend to carry out the traineeship **or** in English;

**( ) Letter of intent** (form to be downloaded from the web page)

**( ) Language certification**

**( ) Other:**

***Information pursuant to art. 13 of Legislative Decree 196/2003***

***Personal data will be collected and processed, in compliance with the law, for purposes related to the performance of institutional activities, in particular for all the obligations connected with the selection procedure and the possible awarding of grants.***

----------------------------------------------------------------------------------**RECEIPT OF APPLICATION FORM ERASMUS +TRAINEESHIP academic year 2020/21**

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FIRST NAME SURNAME MATRICULATION NO. RECEIPT STAMP