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## Application for Incoming ERASMUS Student Academic year 20 . . /20 .

**THIS DOCUMENT AND YOUR PORTFOLIO HAS TO BE SENT IN BEFORE THE 15<sup>TH</sup> OF APRIL FOR THE AUTUMN SEMESTER OR THE 10<sup>TH</sup> OF NOVEMBER FOR THE SPRING SEMESTER**

### Personal Details

Name :	Address :
First name :	Telephone :
Date of birth (day/month/year) :	Email :
Gender : M / F	Nationality :
Name and subject of study:	Year of study:
ECTS completed so far :	Dates for exchange: <input type="checkbox"/> first term <input type="checkbox"/> second term

### Chosen option in Brussels:

Name and address of Home Institution :

Erasmus Institutional Coordinator :

School stamp :

Tel :

email:

**Student's signature :**

**Institutional Coordinator's signature :**

This application should be completed in BLACK CAPITALS and must be returned duly signed and stamped to:

Nicolas de Moy ARBA-ESA Erasmus Office 144 rue du Midi, 1000 Bruxelles T :0032 2 548 05 25

F :0032 2 548 05 26 E : erasmus@arba-esa.be

**Deadline for admissions: April 15<sup>TH</sup> for the autumn semester November 10<sup>TH</sup> for the spring semester**