BARTIN UNIVERSITY

PHOTO

Erasmus+ Outgoing Staff for Training

Application Form

2019/20

1. **Personal Information**

|  |  |
| --- | --- |
| **Name and Surname** |  |
| **Citizenship ID Number OR Passport No** |  |
| **Date of Birth** |  | **Place of Birth** |  |
| **Gender** | **Female** **[ ]  Male****[ ]**  | **Gender** |  |
| **Phone (Home)** |  | **Phone (GSM)** |  |
| **Current Address** |  |
| **Permanent Address** |  |

1. **Administrative and Academic Information**

|  |  |  |  |
| --- | --- | --- | --- |
| **Faculty/Institute** |  | **Department** |  |
| **Position/Job Title** |  | **Working area** (where you work at your home institution) | I: InternationalF: FinanceG: General Administration and TechnicalT: TeachingS: Student information,C: Continuing Education, O: Other |
| **YDS or Equivalent Test Result** **(UDS, TOEFL/IELTS etc.) & Year** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **(Grade)** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **(Year)** |
| **Commencement of Work at Bartın University** | \_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_ **(Day/Month/Year)** |
| **Are you and Erasmus Departmental /****Faculty /****Institute Coordinator** | Yes [ ]  No [ ] **(If yes) I have been a Departmental/Faculty/Institute coordinator at** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Academic Unit) *SINCE*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Month-Year)** |

1. **Details of Application and Proposed Mobility Abroad**

|  |  |
| --- | --- |
| **Number of Previous Erasmus+ Experience**(if applicable, please give details for your previous experience of mobility) | This will be my first experience for a staff mobility [ ]  |
| I have previously experienced staff mobility[ ]  |  | **Details of Previous Mobility** |
| **Teaching or Training** | **Institution / Country** |
| **Dates** | 1. \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_
 |  |
| 1. \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_
 |  |
| **In case the quota is full, would you like to participate in the mobility with our partner K-GEM project?** |  Yes [ ]  No [ ]  |
| **Semester you would like to mobilize in** | Fall [ ]  Spring [ ]  |
| **The host institution that you will visit** *(If applicable)* | **No** | **Department/Unit** | **Organization / Enterprise / University** | **Country** |
| **1.** |  |  |  |
| **2.** |  |  |  |
| **Approximate dates of proposed visit** | **Departure Date (when you leave our university):** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_ **Arrival Date (when you return our institution):** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_ |
| **What is your purpose of visit?** |  |
| **Brief details of your planned visit:***Who are you planning to engage with?**What type of activities are you hoping to undertake?* |  |
| **What *specific* outcomes are you anticipating/aiming to deliver or achieve?** |  |
| **Size of Host Institution** |  (1-50) Small [ ]  (50-500) Medium [ ] (˃500) Large [ ] \*Measured according to the number of staff members |
| **How will your home institution (Bartın University) benefit from this mobility** |  |
| **Number of Training Hours** (Minimum 2 days and full time training) | \_\_\_\_\_\_\_\_\_ hours \_\_\_\_\_\_\_\_\_ days |

1. **Applicant’s Signature :**

**Date of Application :**