BARTIN UNIVERSITY

PHOTO

Erasmus+ Outgoing Staff for Training

Application Form

2017/18

1. **Personal Information**

|  |  |
| --- | --- |
| **Name and Surname** |  |
| **Citizenship ID Number OR Passport No** |  |
| **Date of Birth and Place** |  |
| **E-Mail** |  | **Gender** | **Female** **[ ]  Male****[ ]**  |
| **Phone (Home)** |  | **Phone (GSM)** |  |
| **Current Address** |  |
| **Permanent Address** |  |
| **Do you have any permanent disabilities or health problems?** | **Please state and prove with attachments…** |
| **Are you a war veteran or a first degree relative of a martyr?** | **Please state and prove with attachments…** |

1. **Administrative and Academic Information**

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| --- | --- |
| **Faculty/Institute/Unit/Department** |  |
| **Position/Job Title** |  |
| **YDS or Equivalent Test Result (YOKDIL, TOEFL/CAE/PTE etc.) & Year** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Grade) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Year)** |
| **Commencement of Work at Bartın University** | **\_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_ (Day/Month/Year)** |
| **Working area** **(where you work at your home institution)** | I: InternationalF: FinanceG: General Administration and TechnicalT: TeachingS: Student information,C: Continuing Education, O: Other |
| **Are you an Erasmus Departmental/Faculty/Institute Coordinator** | Yes [ ]  No [ ] **(If yes) I am 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 is my first application for a staff mobility [ ]  |
| I have previously experienced staff mobility[ ]  |  | **Type of Previous Mobility** |
| **Teaching** | **Traineeship** |
| **Dates** | 1. \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_
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| **Semester you would like to mobilize in** | Fall [ ]  Spring [ ]  |
| **Have you identified the host organization/university for your proposed visit?** **If so please state** | **Destination university or organization & country:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (university/organization)****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (country)** |
| **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 |
| **Have you got permission from your line manager to undertake this travel?** **(please attach email confirmation)** | Yes [ ]  No [ ] ***Please return your completed form, along with an email from your line manager indicating their support of your application, to International Relations and Erasmus Office (******ulik@bartin.edu.tr******) by 24th November 2017.*** |
| **How will your home institution benefit from this exchange?** |  |
| **Days of Teaching Hours**(Minimum 2 days and Full Time Training) | \_\_\_\_\_\_\_\_\_ hours \_\_\_\_\_\_\_\_\_ days |

1. **Applicant’s Signature :**

**Date of Application :**