

# SMILE

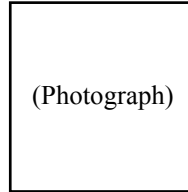
## STUDENT APPLICATION FORM

(to be used only students in the framework of SMILE)

ACADEMIC SEMESTER / YEAR : ...../.....

FIELD OF STUDY: .....

Use black capital letters. Incomplete applications will not be considered.



### SENDING INSTITUTION

Name: .....

SMILE Co-ordinator: .....

Address: .....

Phone: ..... Fax: ..... E-mail: .....

*Signature of the SMILE co-ordinator:*

### STUDENT'S PERSONAL DATA

(to be completed by the student applying)

Family name: ..... First name(s): .....

Date of birth: ..... Sex:  Male  Female

Place of birth: ..... Nationality: .....

Current address: ..... Permanent address (if different): .....

.....

.....

Current address is valid until: ..... Phone: .....

Phone: ..... E-mail: .....

### PURPOSE OF THE STAY

Project Work Areas of interest: .....

Course unit (as specified in the learning agreement): .....

Briefly state the reasons why you wish to study abroad?

.....

.....

.....

.....

### PREVIOUS CONTACT WITH THE HOST INSTITUTION

Have you had any kind of contact with anyone at the host institution?  Yes  No

If yes, name of the department and contact person(s): .....

.....

.....

**LANGUAGE COMPETENCE**

Mother tongue:.....

Language of instruction at home institution (if different):.....

Other languages	I am currently studying this language		I am able to follow lectures		I would be able to follow lectures with some extra preparation	
	YES	NO	YES	NO	YES	NO
.....	_____	_____	_____	_____	_____	_____
.....	_____	_____	_____	_____	_____	_____
.....	_____	_____	_____	_____	_____	_____

Language list certificates:	Score	Place and Data
.....	_____	_____
.....	_____	_____
.....	_____	_____

**WORK (or research) EXPERIENCE RELATED TO CURRENT STUDY (if relevant)**

Type of experience	Firm/organisation	Dates	Country
.....	.....	.....	.....
.....	.....	.....	.....

**PREVIOUS AND CURRENT STUDY**

Diploma/degree for which you are currently studying: .....

Year attended (at the present date): ..... Area of specialisation: .....

Have you already been studying abroad? YES \_\_\_\_ NO \_\_\_\_

If Yes, when? at which institution? .....

**COMPULSORY ENCLOSURES: 1. Curriculum Vitae; 2. Official transcript of records (signed by the home institution); 3. Copy of the national identity card or passport and one additional photograph; 4. Information about courses you are currently taking.**

**I hereby give my consent to send this form along with a copy of my Transcript of records and a letter of presentation to the host institution, and I declare that all the information given is correct and complete.**

**Student's Signature:**

**Date:**

<b>HOST INSTITUTION</b>	
Name:	
SMILE Co-ordinator:	
E-mail:	
We hereby acknowledge receipt of the candidate's application. The above-mentioned student is:	
<input type="checkbox"/> provisionally accepted at our institution	
<input type="checkbox"/> not accepted at our institution	
Departmental co-ordinator's signature:	SMILE co-ordinator's signature:
	(Stamp)
Date: .....	Date: .....

**STATEMENT OF PURPOSE**