



Erasmus+



**HALIÇ UNIVERSITY**  
**ERASMUS+ KA171**  
**INCOMING STUDENT APPLICATION FORM**  
**Academic year 2022-2023**

**PHOTOGRAPH**

**Student's Personal Data**

Family name:	
First name(s):	
Male / Female:	Nationality:
Place and date of birth:	
Father's Name	
Mother's Name	
Permanent address:	
Telephone:	Mobile Phone:
E-mail:	
Field and degree of study:	Completed Year of study:
<b>Sending Institute Data</b>	
Full name:	
Address:	
Erasmus code (If available):	



Erasmus+



### Hosting Institution

Full name <b>HALIÇ UNIVERSITY</b>
Address: Güzeltepe Mahallesi 15 Temmuz Şehitler Caddesi No:14/12 Eyüpsultan / İSTANBUL
Erasmus code: <b>TR ISTANBU 15</b>
Email address: erasmus@halic.edu.tr

I am applying for:  Study  Traineeship

### Intended Period in academic year 2022–2023

- First semester  
 Second semester  
 Full Year

### Language Competence

Mother tongue:

Other languages:

TURKISH	ENGLISH	GERMAN	SPANISH
<input type="checkbox"/> I have sufficient knowledge to follow lessons	<input type="checkbox"/> I have sufficient knowledge to follow lessons	<input type="checkbox"/> I have sufficient knowledge to follow lessons	<input type="checkbox"/> I have sufficient knowledge to follow lessons
<input type="checkbox"/> I have some knowledge but not enough to follow lessons	<input type="checkbox"/> I have some knowledge but not enough to follow lessons	<input type="checkbox"/> I have some knowledge but not enough to follow lessons	<input type="checkbox"/> I have some knowledge but not enough to follow lessons
<input type="checkbox"/> I am currently studying this language	<input type="checkbox"/> I am currently studying this language	<input type="checkbox"/> I am currently studying this language	<input type="checkbox"/> I am currently studying this language

Student's signature: \_\_\_\_\_

### Data of Erasmus Coordinator Sending Institution:

Name: \_\_\_\_\_

E-mail: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Official Stamp