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| TheState University of Applied Sciences in Elbląg | STUDENT APPLICATION FORM  | Photo |

# Personal data

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| Surname …………………………………………………..…................… First name: ………………………………………………………………..…. Date of birth :……………………………………….……………………… Place of birth:……………………………………………………………….. Sex :…………………………………………………………………..….....… Nationality: …………………………………………………….………….. | Home address (postal): Street: ………………………………..………………….Post Code: ………………………………………….....Town: …………………………………………………….Country: ……………………………..………………….Phone: ………………………………………..…………E-mail: …………………………………………………... |

# Study profile

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| Sending institution: ……………………………………………………………………….………………………………………………….Sending Faculty/Department: …………………………………………………….……………………………………………………..Course of studies: ……………………………………………………………………………………………..………………….…………… |
| I apply for admission for semester: Winter Semester 20....../….Summer Semester 20....../…. | Duration of stay (months): |
| Choosed course of study at PWSZ Elbląg:* Public Administration
* Economics
* Informatics
* Pedagogy
* Philology – English
* Philology – German
* Polish Philology
* Mechanics and Machine Technology
* Environment Protection
* Civil Engineering
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**Foreign language competence**

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| Mother tongue: ......……….......... Language of instruction at home institution (if different): ...................... |
| Other languages | I am currently studying this language  | I have sufficient knowledge to follow lectures  | I would have sufficient knowledge to follow lectures if I had some extra preparation  |
| Yes | No  | Yes | No  | Yes | No  |
| ……………………………………………………… |  |  |  |  |  |  |
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| Please enclose the following documents: * Learning Agreement
* Transcript of records
* Personal data sheet (CV)
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| AccommodationPeriod of period of stay: from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ until \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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|  Student’s signature Date |

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| Approval by home universityWe hereby recommended the student to study the course above at PWSZ in Elblag. We also verify that the knowledge of English or German is sufficient to follow the courses. Departmental coordinator’s signature: Institutional Coordinator’s signature:Date: Date: |
| Contact person at home universityName, surname: …………………………………………………………….Phone No: …………………………………………………………………..Fax No:………………………………………………………………………e-mail: ……………………………………………………………………… |

**Please send this LLP/ERASMUS application form to the following address:**

 Państwowa Wyższa Szkoła Zawodowa w Elblągu,

Biuro Promocji i Współpracy z Zagranicą

ul. Wojska Polskiego 1

82-300 Elbląg, Poland

# tel.: +48 55 6290538 fax: +48 55 6290510

**e-mail: bpwz@pwsz.elblag.pl** website: http://www.pwsz.elblag.pl

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