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| **I- PERSONAL INFORMATION** |
| **National ID No(Passport Number for International Students)** |  |  |
| **Student ID No** |  |
| **Surname** |  |
| **Name (First / Middle)** |  |
| **Sex** | Female [ ]  Male [ ]  |
| **Date of Birth (Day/Month/Year)** |  |
| **Place of Birth** |  |
| **Citizenship(s)\*** |  |
| *\*Applicant’s grades will be decreased by 10 point if they will be applying to go to the country of citizenship.*  |
| **Mother’s Name/Surname** |  |
| **Father’s Name/ Surname** |  |
| **Department / Program** |   |
| **Cycle** | Vocational[ ] *(Short Cycle)* | Bachelor [ ]   *(First Cycle)* | Master [ ]   *(Second Cycle)*  |
| **GPA (Grade Point Average)** |       |
| **Disability\*** | Yes [ ]  No [ ]  *If yes, please submit copy of your card at the time of application*  |
| *\*Applicant’s grades will be increased by 10 points if they’ll prove that they have a disability. Additional grant is allocated for the disabled student for extra costs including a accompanying person.*  |
| **Children of martyr or veteran\***  | Yes [ ]  No [ ]  |
| *\*Applicant’s grades will be increased by 10 points if they are a child of a marty and/or veteran under the 3713 act*  |
| ***\*Students receiving protection under the 2828 Social Services Law*** | Yes [ ]  No [ ]  *If yes, please submit copy of your document at the time of application* |
| *\*Applicant’s grades will be increased by 10 points if they are receiving protection under the 2828 Social Services Law* |
| **Prior participation/s in Erasmus Mobility Programs\*** | Yes [ ]  | *If Yes, please specify the type, the year and duration of the mobility :* **Study[ ]  - 20     /20      Academic Year****Traineeship[ ]  - 20     /20      Academic Year****Duration : \_\_\_\_\_ days/months** |
| No [ ]  |
| *\* Students have right to attend Erasmus Mobility Programs (Study and Internship) with/without grant once (for 12 months in total) in every cycle (Vocational-Bachelor and Master.).**\* The Erasmus Grades of the applicants who attend the Erasmus Mobility before will be reduced by 10 points for each of the mobilities.* |
| **Are you also applying to Erasmus+ Traineeship Program?\*** | Yes [ ]  | *If Yes, please specify the mobility type for which your Erasmus Grade will be reduced by 10 points***Study[ ]** **Traineeship[ ]**  |
| No [ ]  |
| *\* The Erasmus Grades of the applicants who are applying for both study and traineeship will be reduced by 10 points inaccordance with their preference.*  |
| **Contact Details** |
| **Postal / Home Address** |  |
| **Telephone (Home / Mobile)** |  |
| **E-mail(s)** |  |
| **Whom would you like to be contacted in the case of an emergency?** |
| **Surname** |  |
| **Name (First / Middle)** |  |
| **Relation to the Applicant**  |  |
| **Postal / Home Address**  |  |
| **Telephone (Home / Mobile)**  |  |
| **III. INFORMATION ON YOUR STUDY PERIOD ABROAD** |
| **How long do you plan to participate in the Erasmus Program abroad?**  | [ ] **One Semester** ( [ ]  Fall [ ]  Spring)[ ] **Two Semesters** |
| **UNIVERSITY PREFERENCES** ***Please check the list of available courses, language of instruction and academic calendar (for one semester)*** |
| **1** | Country  |       |
| **Name of University** |  |
| **Name of Department at HostUniversity** |  |
| **Language of Instruction** |  |
| **2** | **Country**  |  |
| **Name of University** |  |
| **Name of Department at HostUniversity** |  |
| **Language of Instruction** |  |
| **3** | **Country**  |  |
| **Name of University** |  |
| **Name of Department at HostUniversity** |  |
| **Language of Instruction** |  |
| **4** | **Country**  |  |
| **Name of University** |  |
| **Name of Department at HostUniversity** |  |
| **Language of Instruction** |  |
| **Erasmus Departmental/ Program/Vocational School Coordinator :** **Name Surname**: **Signature** |
| **IV. Additional Documents** |
| 1. **Official Transcript**
 |
| 1. **Language Exam Result**
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| **V. APPROVAL OF THE APPLICANT** |
| **I, hereby confirm that; All information in my application is complete and correct and I have read and understood the all the information on the Call for Applications published on Lokman Hekim University web-site available. Name of the Applicant :** **Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date :** |