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| **ERASMUS+ STUDY PLAN**  |
| **ERASMUS+ International Credit Mobility Grant for Study** |

**PERSONAL DATA**

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| First name:  | Surname:  |
| CEU Department:  |
| Email:  |
| Study Level: graduate (Master)    doctoral (PhD)    | 6-digit CEU ID card nr.:  |

RECEIVING INSTITUTION

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| Name of host institution:       |
| Unit/Department/Faculty:       |
| Area of Study:       |
| Proposed period abroad: From:   /  /     | To:   /  /     | Duration in months:  |

PROPOSED STUDY PROGRAM

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| --- | --- | --- |
| Course code | Course title | ECTS |
|       |       |       |
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| Total |  |       |

SIGNATURES

|  |  |
| --- | --- |
| Name of the applicant:      Date:   /  /     | Signature |
| Name of supervisor at CEU:      Date:   /  /     | Signature |