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| **ERASMUS+ STUDY PLAN FOR STUDY ABROAD PERIOD** |

**PERSONAL DATA**

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| --- | --- | --- |
| First name: | Surname: | |
| CEU Department: | | |
| Have you already participated in Erasmus Mobility?  Yes  No | | |
| If yes, for how many months and in which study cycle? (BA, MA, PhD) Please, also indicate if you had the Erasmus student status but did not receive a grant. | | BA  no. of months:  MA  no. of months:  PhD  no. of months: |

DISABILITY DECLARATION

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| Do you have a disability for which special arrangements need to be considered? | Yes  No |
| Please attach an extra sheet for explanation if your answer is yes. | |

RECEIVING INSTITUTION

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

PROPOSED STUDY PROGRAM

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

SIGNATURES

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