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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

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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 |